## Home Help Agency

CHAMPS Provider
Enrollment
Instructions



"Working to protect, preserve and promote the health and safety of the people of Michigan by listening, communicating and educating our providers, in order to effectively resolve issues and enable providers to find solutions within our industry. We are committed to establishing customer trust and value by providing a quality experience the first time, every time."

-Provider Relations

#### Checklist

#### \*\*\*The CHAMPS Provider Enrollment application must be completed within 30 days\*\*\*

For anyone who wants to become a new Home Help Agency provider:

- ☐ Have paper and a writing utensil nearby
- ☐ Register with SIGMA Financial (Slide 3)
- ☐ Create a MILogin user ID and password (Slides 4-8)
- ☐ Gain access to CHAMPS (Slides 9-17)
- ☐ Fill out the Provider Enrollment Application (Slides 18-67)
- ☐ Track your Application (Slides 68-75)
- ☐ Application Approved (Slide 76)

Call the Provider Support Helpline if you need additional help 1-800-979-4662



# Prior to enrolling in CHAMPS

Agency providers will want to ensure they are enrolled in SIGMA Vendor Self-Service (VSS) prior to enrolling within CHAMPS.

- SIGMA VSS website: <a href="https://www.Michigan.gov/SIGMAVSS">www.Michigan.gov/SIGMAVSS</a>
- If you have questions regarding this current process, contact the Vendor Support Call Center at 1-888-734-9749 or email <u>SIGMA-Vendor@Michigan.gov</u>

After completing SIGMA registration allow 3-5 business days to begin and complete the CHAMPS application. If you attempt to enroll in CHAMPS during this time, you may get an error when validating your information.



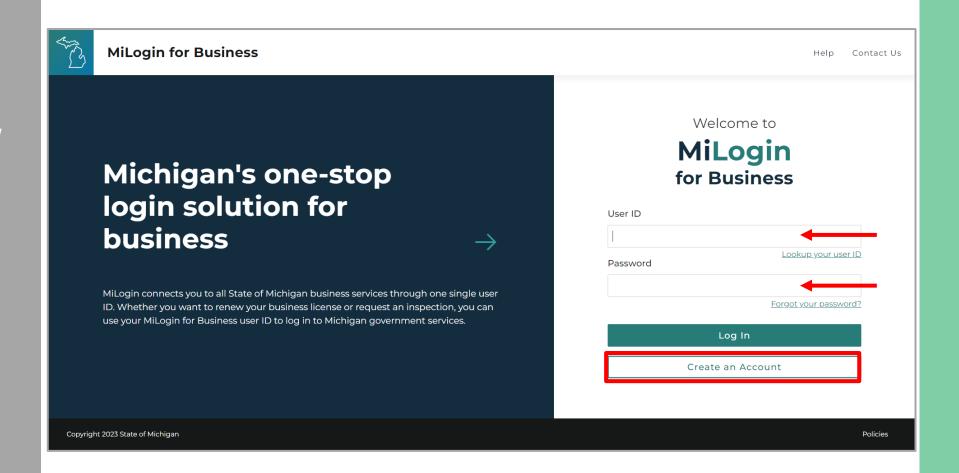
MiLogin is the State of Michigan Identity, Credential, and Access Management (MICAM) solution. All users who need access to the information within CHAMPS must obtain a MiLogin User ID and Password.

The Community Health Automated Medicaid Processing System (CHAMPS) is the MDHHS web-based, rules-driven, real-time adjudication Medicaid Management System. CHAMPS is comprised of the following subsystems: Provider Enrollment, Eligibility and Enrollment, Prior Authorization, Claims and Encounters, and Contracts Management.

As of October 28, 2023, MiLogin Third Party has been rebranded to MiLogin for Business.



- Open your web browser (e.g., Internet Explorer, Google Chrome, Mozilla Firefox, etc.).
- Enter
   <u>https://milogintp.Michigan.g</u>
   <u>ov</u> into the search bar.
- Click create an account.



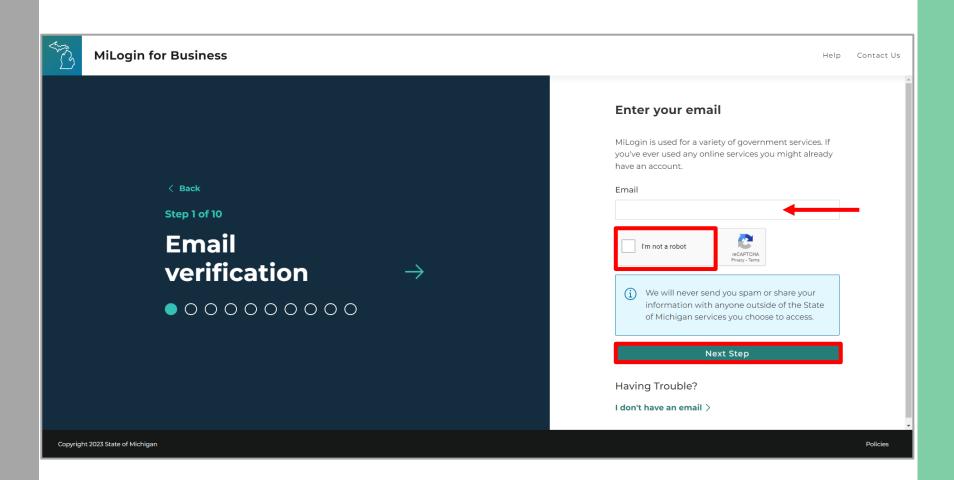


- Enter an email address.
- Check the 'I'm not a robot' checkmark.
- Click Next Step.

**Don't have an email address?** There are several email providers who offer an emai address and services at no cost. A few popular email providers are listed below.

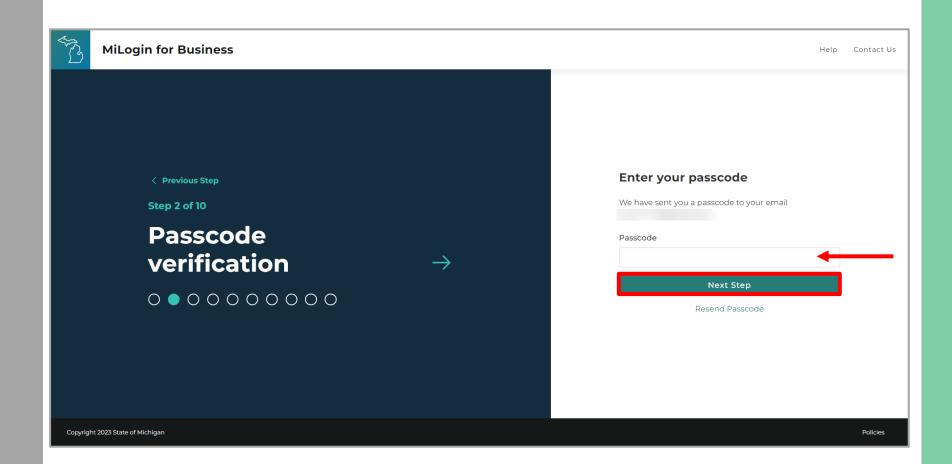
- Gmail: <a href="https://www.google.com/gmail/">https://www.google.com/gmail/</a> about/#
- Yahoo Mail: <a href="https://login.yahoo.com/account/create">https://login.yahoo.com/account/create</a>
- Microsoft Live Hotmail: <a href="https://outlook.live.com/owa/">https://outlook.live.com/owa/</a>

These commercial provider organizations are **not affiliated with the State of Michigan.** Your email messages will not be stored on the State of Michigan systems.



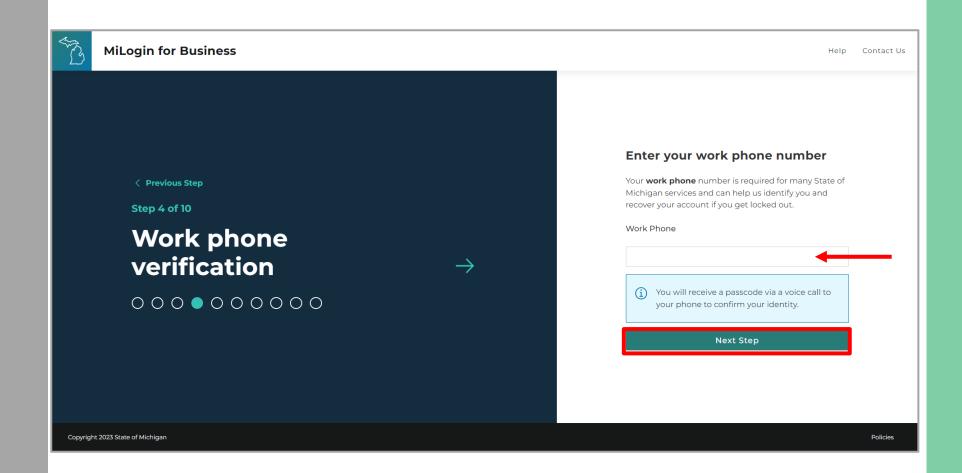


- Enter the Passcode that was sent to the email address.
- Click Next Step.
- If the passcode was not sent select the Resend Passcode link.



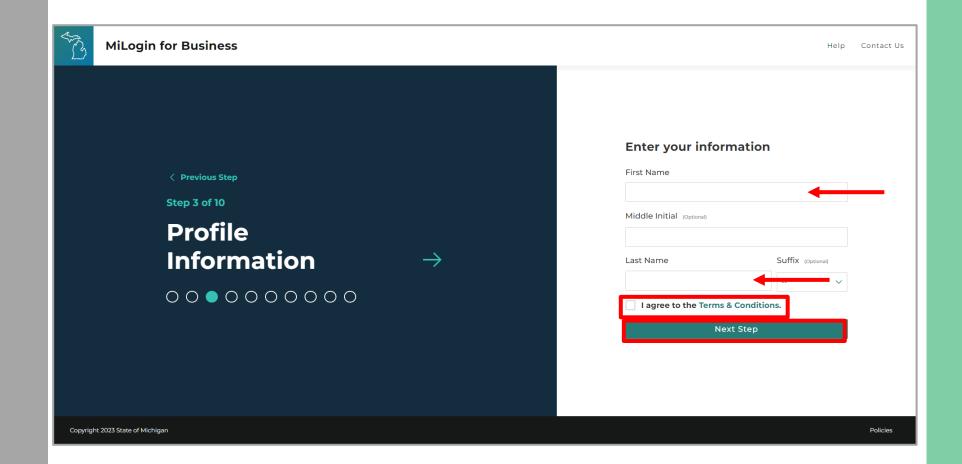


- Enter the Work Phone number.
- Click Next Step.



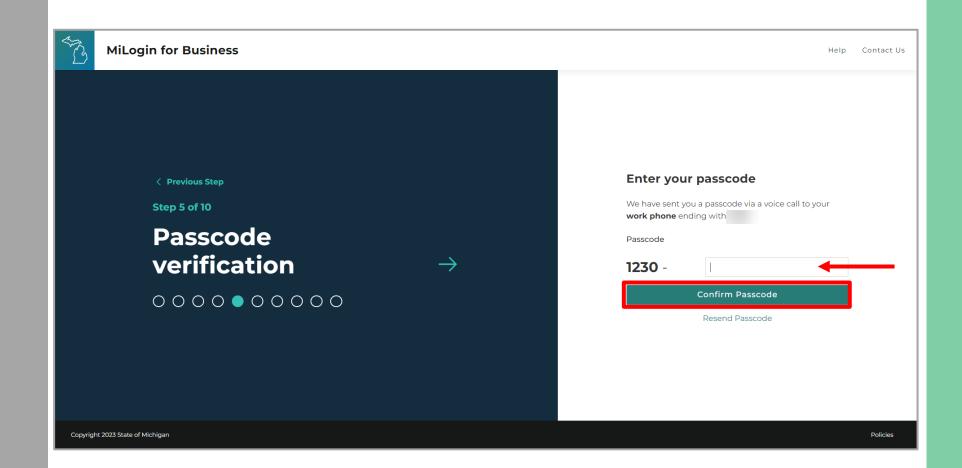


- Enter the User's First, optional Middle Initial, and Last name.
- Review the terms and conditions and click the 'l agree' checkbox.
- Click Next Step.



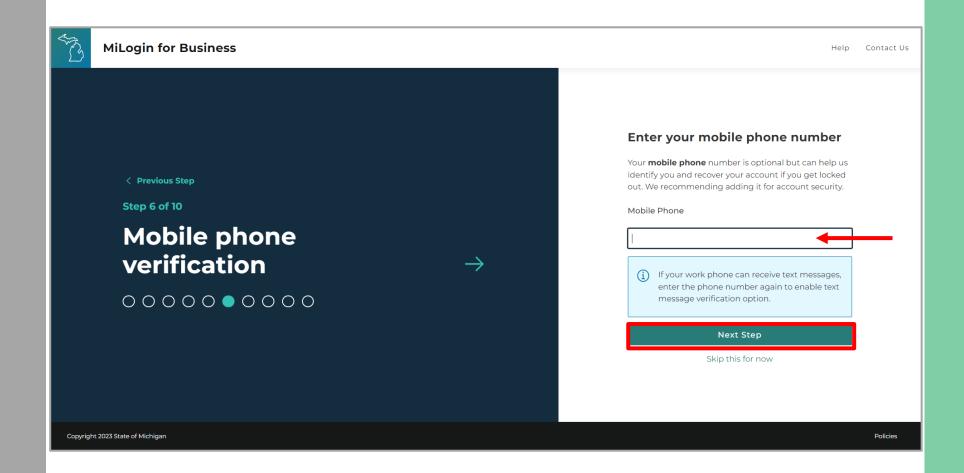


- A phone call will be made to the work phone number.
- Enter the Passcode.
- Click Confirm Passcode.
- If the call was missed, click the Resend Passcode to receive another phone call.



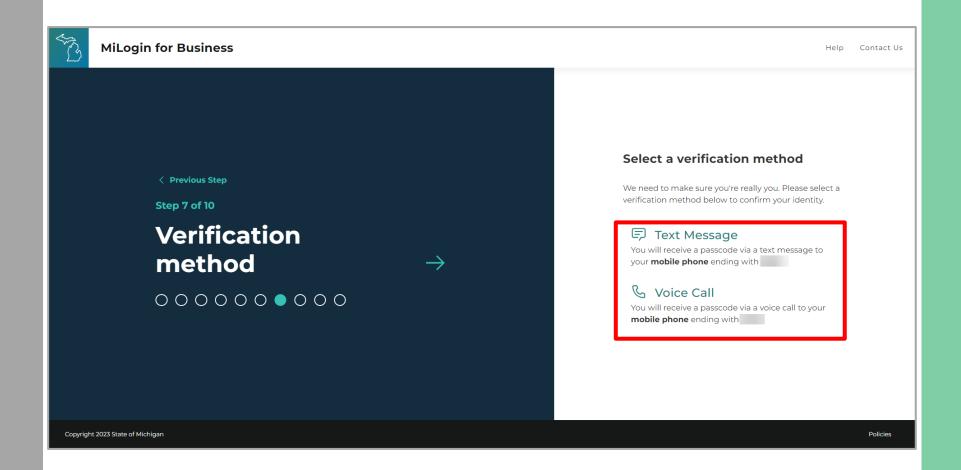


- Enter the mobile phone number.
  - This is an optional step and can be completed later by clicking the 'Skip this for now' link.
- Click Next Step.



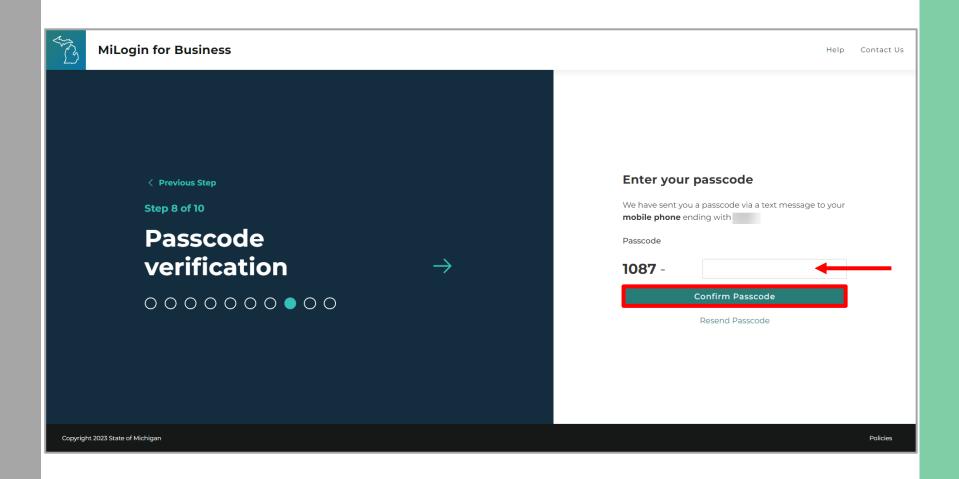


Select either the Text
 Message or Voice Call
 verification method.



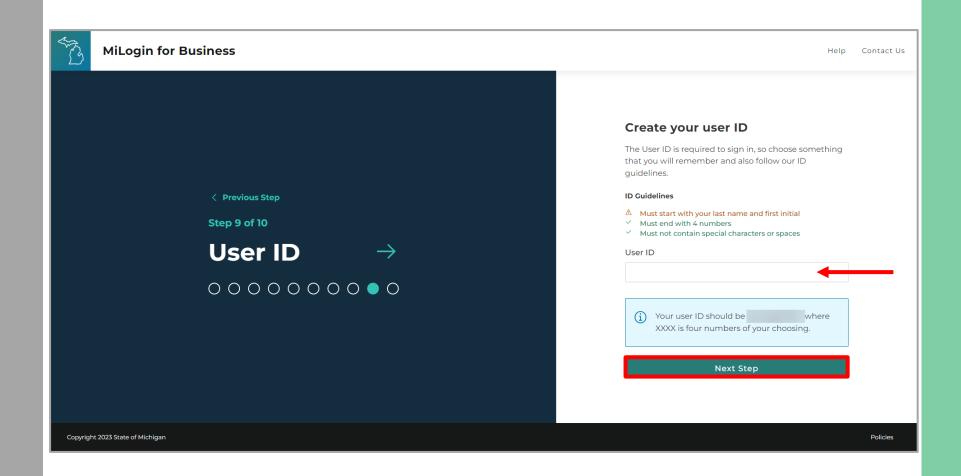


- Enter the Passcode sent to the mobile phone number on file.
- Click Confirm Passcode.



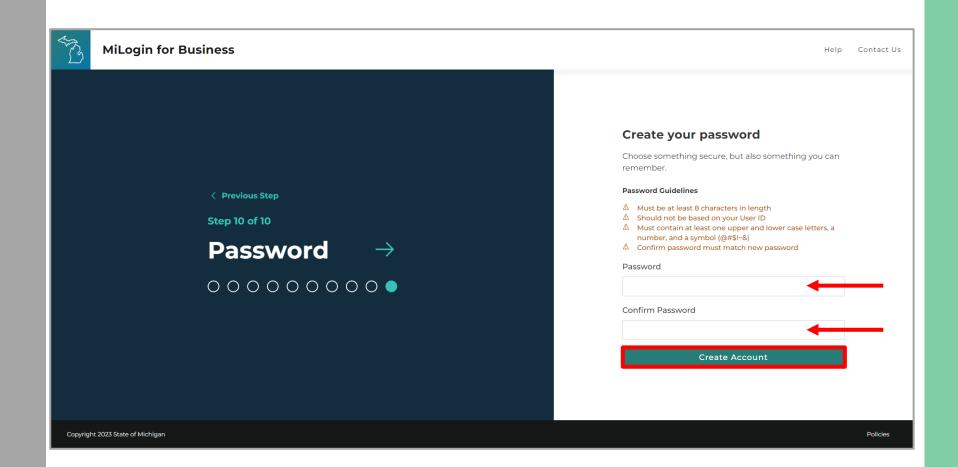


- Enter the User ID following the guidelines provided.
- Click Next Step.





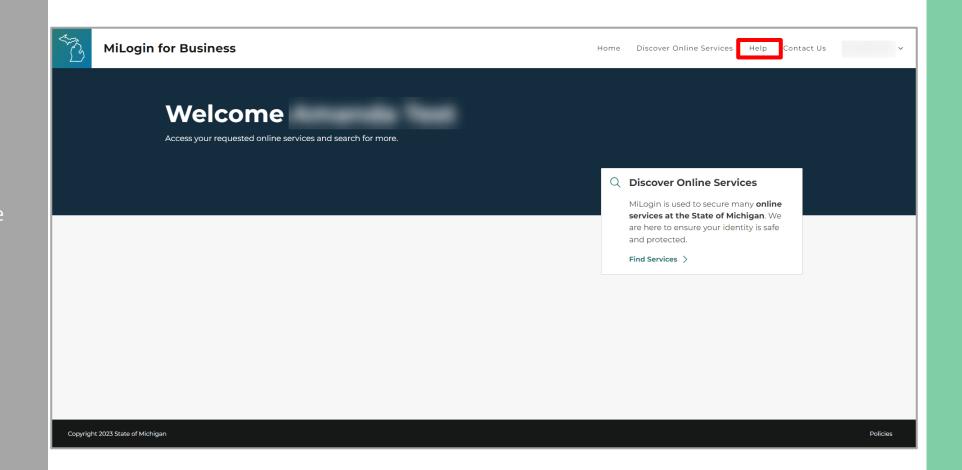
- Create a Password following the guidelines.
- Enter the same password in the Confirm Password field.
- Click Create Account.





- Your MiLogin account has now been created successfully.
- Your MiLogin Welcome Page will not display any online services.
- Click Request Access.

\*Additional MiLogin resources are available by clicking the Help link at the top of the page.

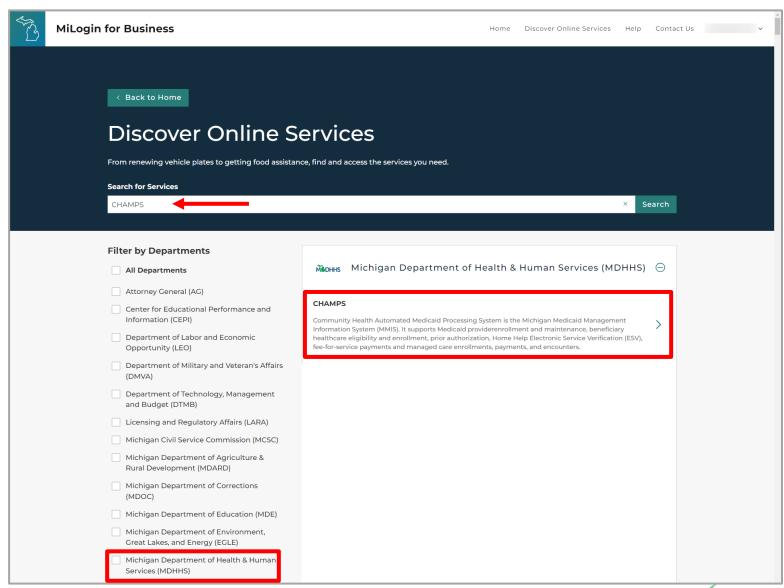




 Filter by Departments and select for Michigan
 Department of Health and Human Services

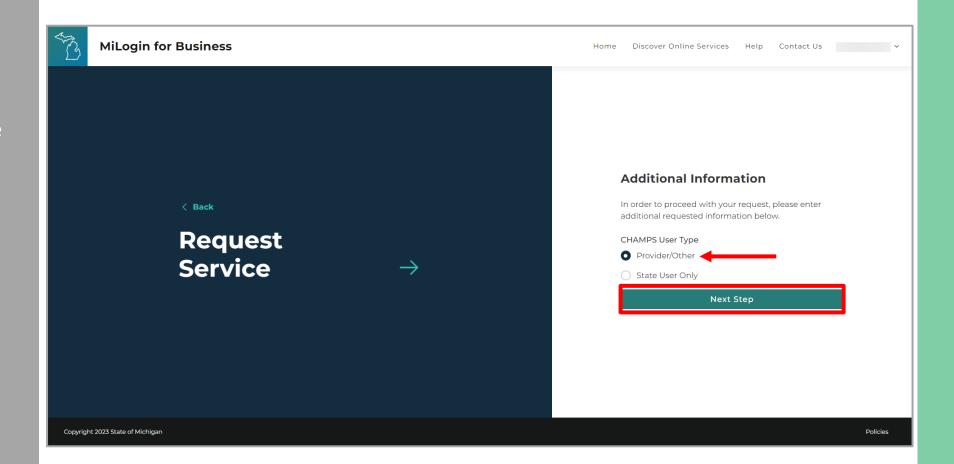
OR

- Enter CHAMPS in the search for services box and click Search.
- Click on CHAMPS.



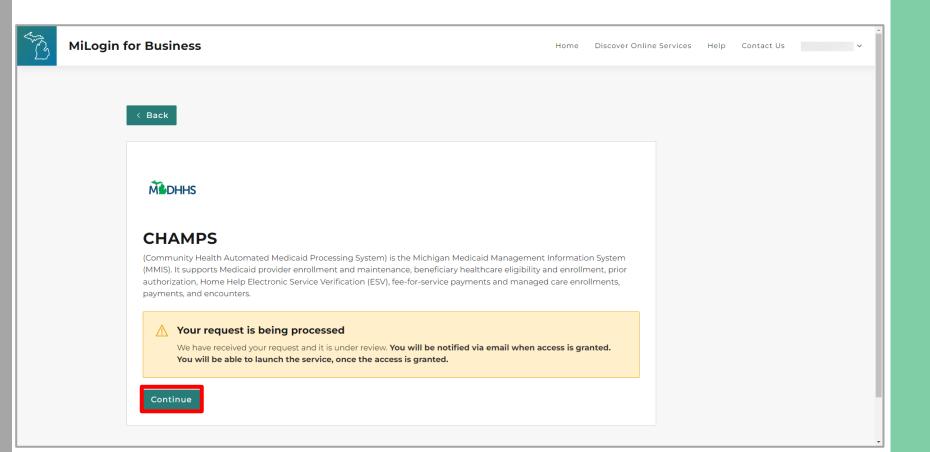


- Select the CHAMPS user type as 'Provider/Other' option.
- Click Next Step.



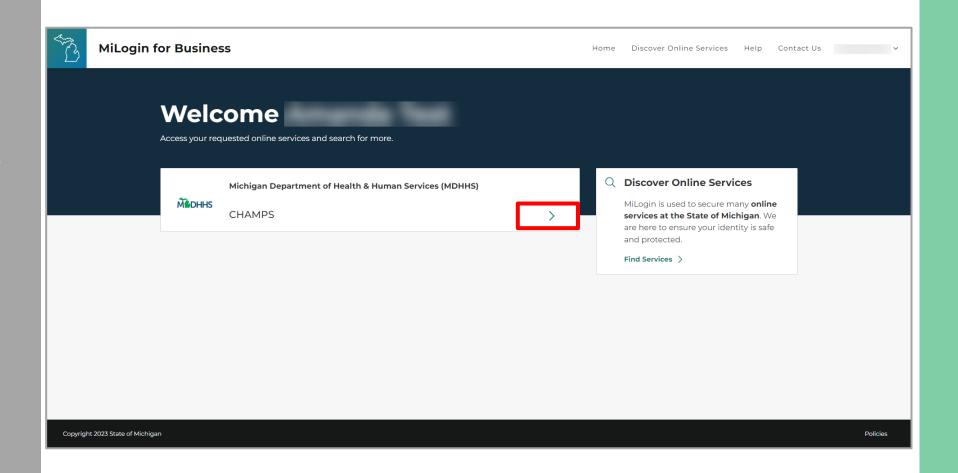


- You will be given
   confirmation that your
   request has been submitted
   successfully and is being
   processed.
- Click the continue to return to the MiLogin Welcome Page.



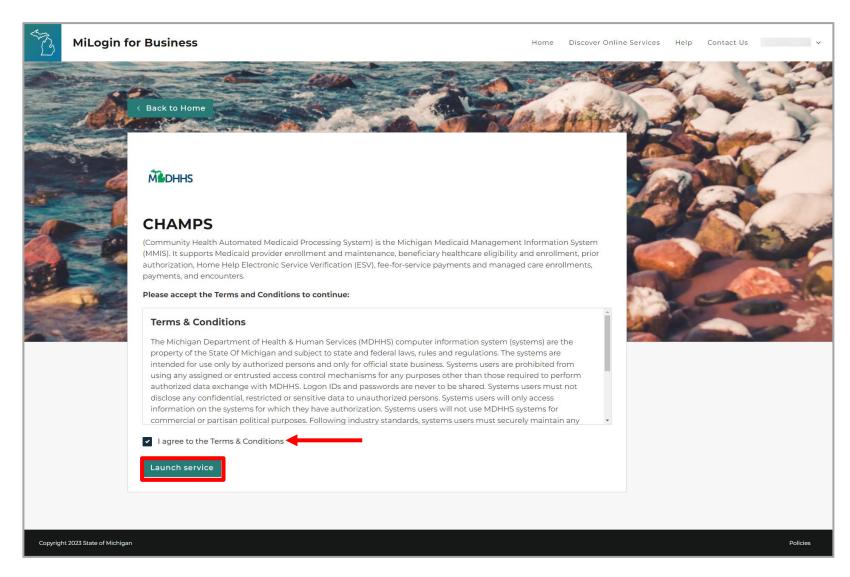


- You will be directed back to your MiLogin Welcome Page.
- Click the CHAMPS hyperlink.



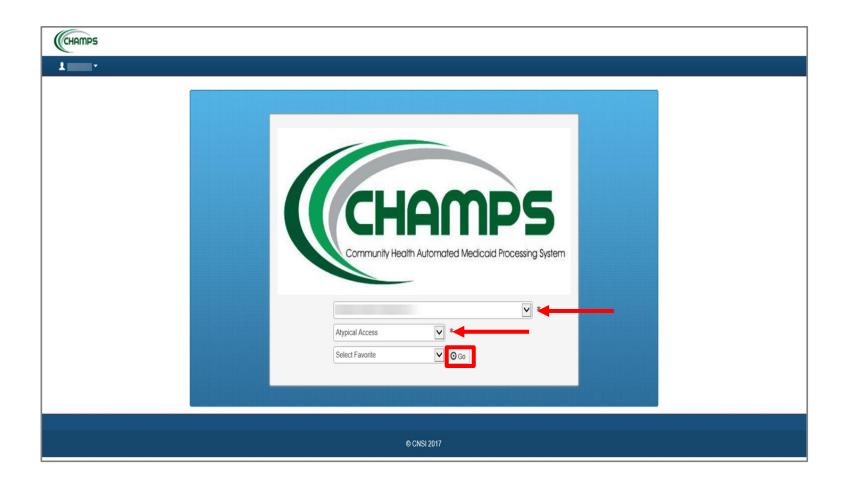


- Review the terms and conditions and check the 'I agree to the Terms & Conditions'.
- Click Launch service.



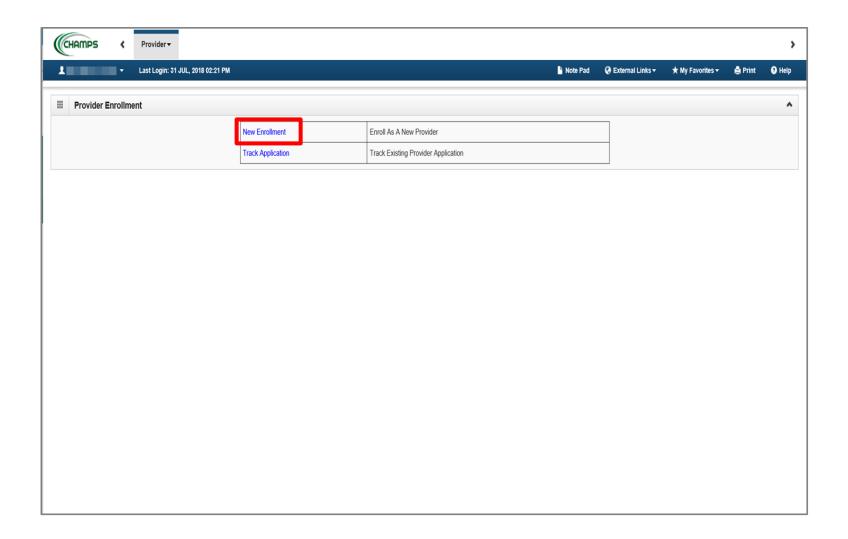


- Your Name and Provider ID number will show in the top section
- In the 'Select Profile' dropdown menu, select Atypical Access
- Click go



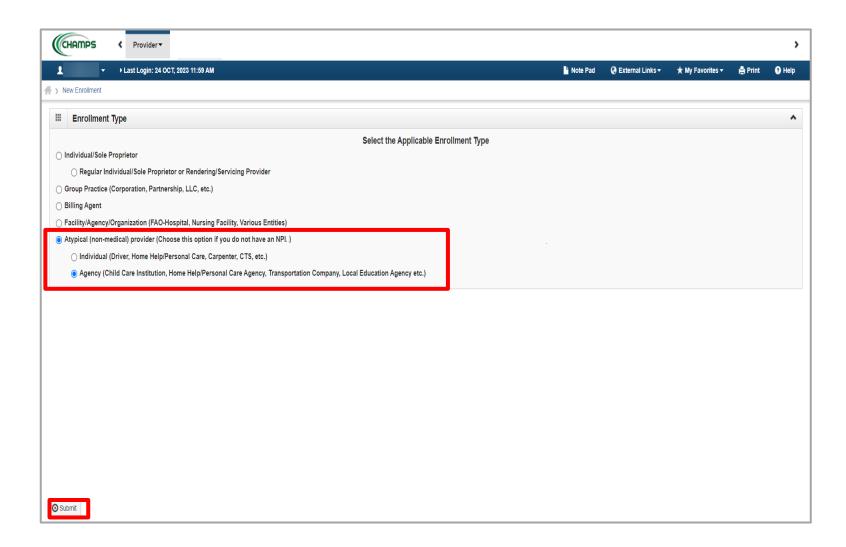


Select New Enrollment.



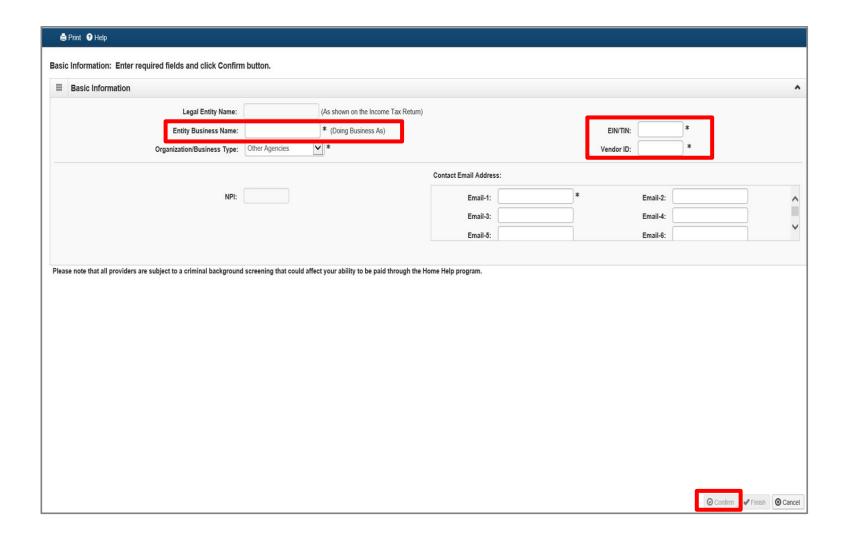


- Select Atypical (non-medical) provider.
- Select Agency.
- Click Submit.



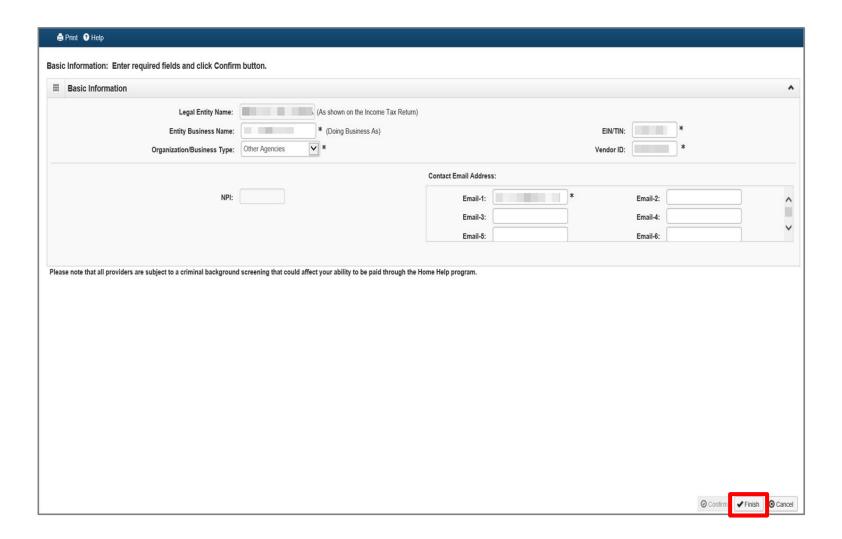


- Enter the required information, indicated by an asterisk (\*): Entity Business Name (Agency Name), EIN/TIN (Federal Tax ID Number), Vendor ID (SIGMA), and Email address.
- Click Confirm.



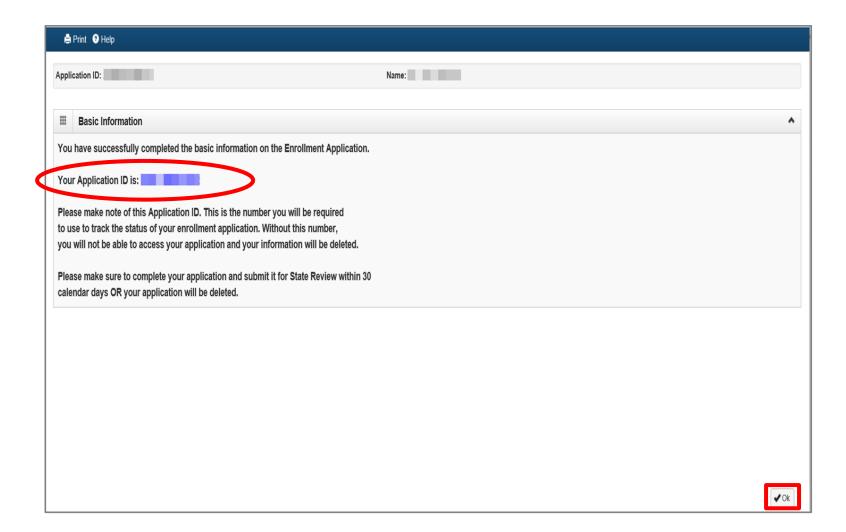


- Click Finish.
- Note: Legal Entity Name has populated.



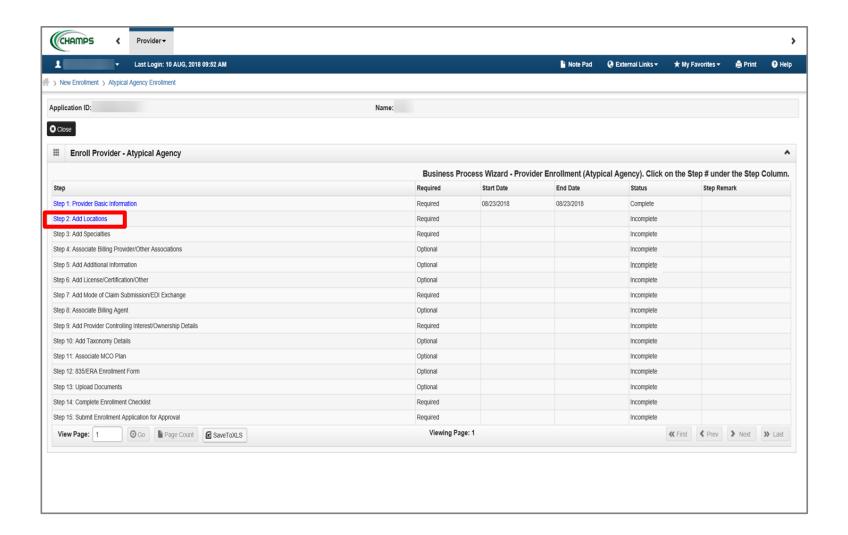


- Write down the Application
   ID number for future
   reference.
- Click OK.



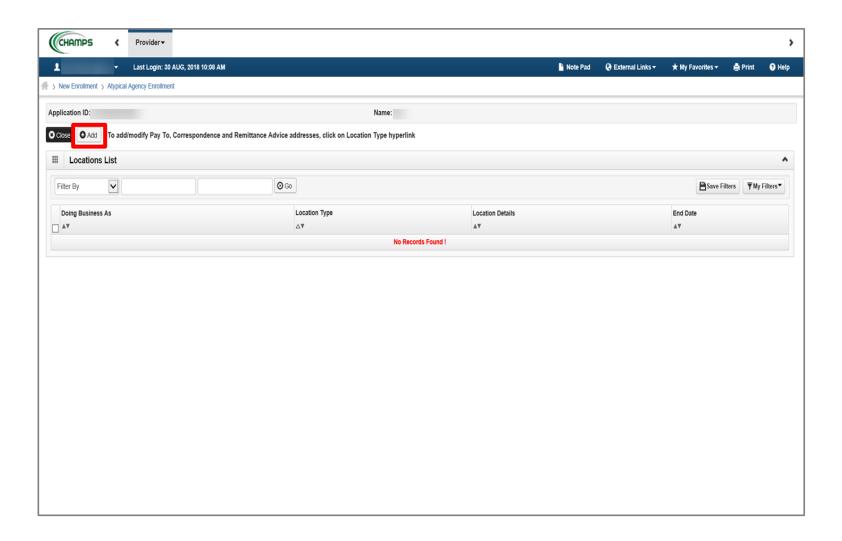


• Click Step 2: Add Locations.



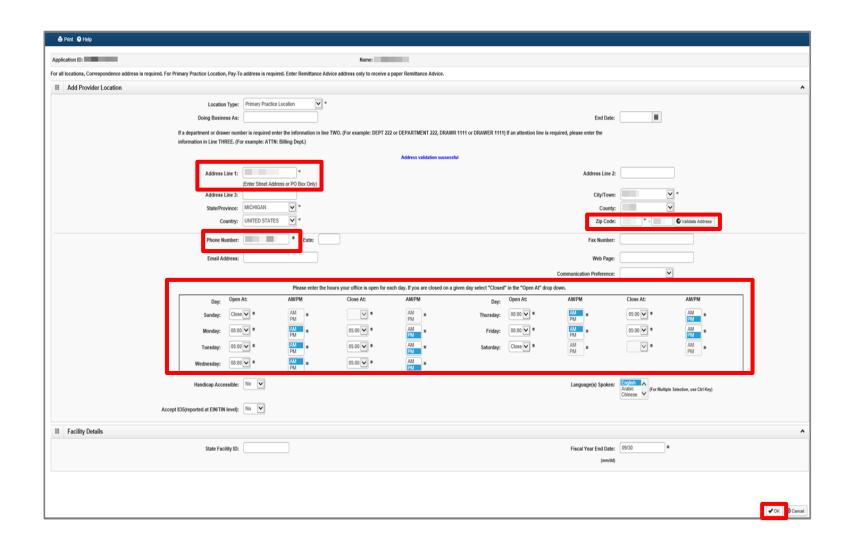


Click Add.



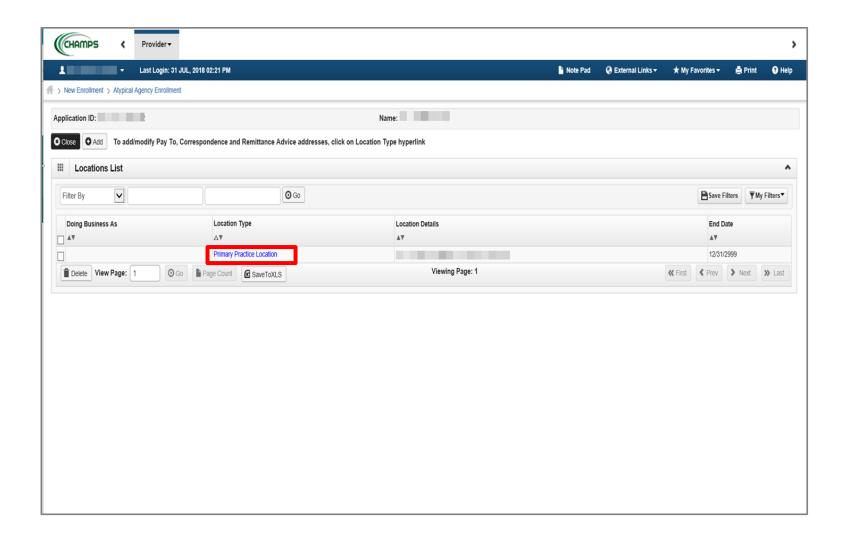


- Enter the required information, indicated by an asterisk (\*): Address,
   Zip Code, Phone Number, and Office Hours.
- Click Validate Address.
- For Office Hours use the drop-down arrow to choose the correct times.
   Make sure to select the hours you are open or choose "Closed".
- Enter your Agency Fiscal Year End Date and click OK.
  - Note: Location Type will always be the Primary Practice Location.
  - Use your Agencies Business Address for Primary Practice Location.
  - When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



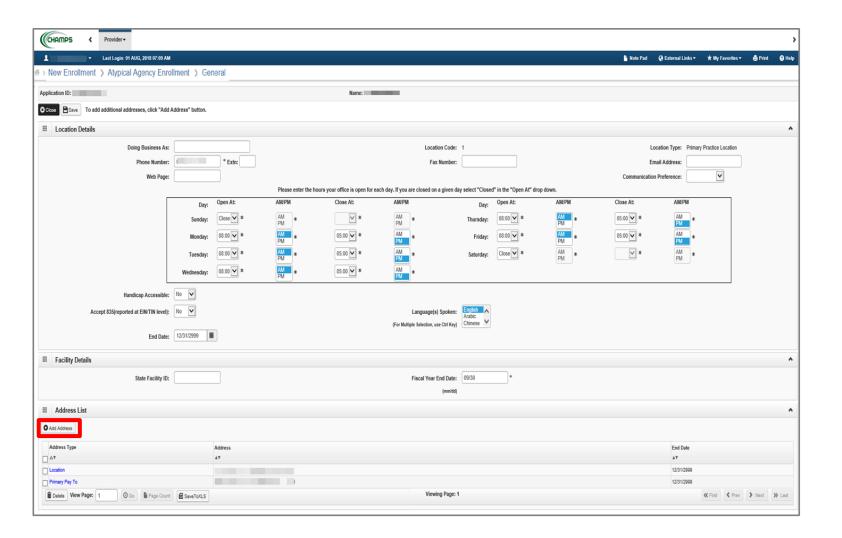


- Click Primary Practice Location.
- Note: You are still in Step 2:
   Add Locations.



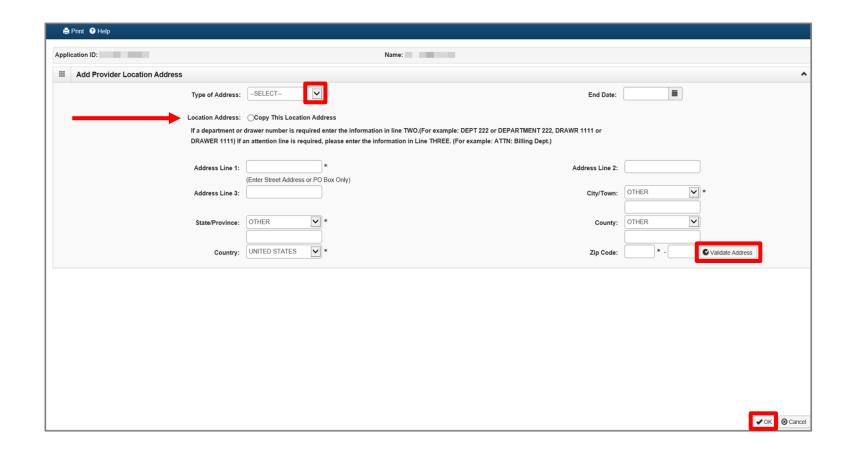


Click Add Address.



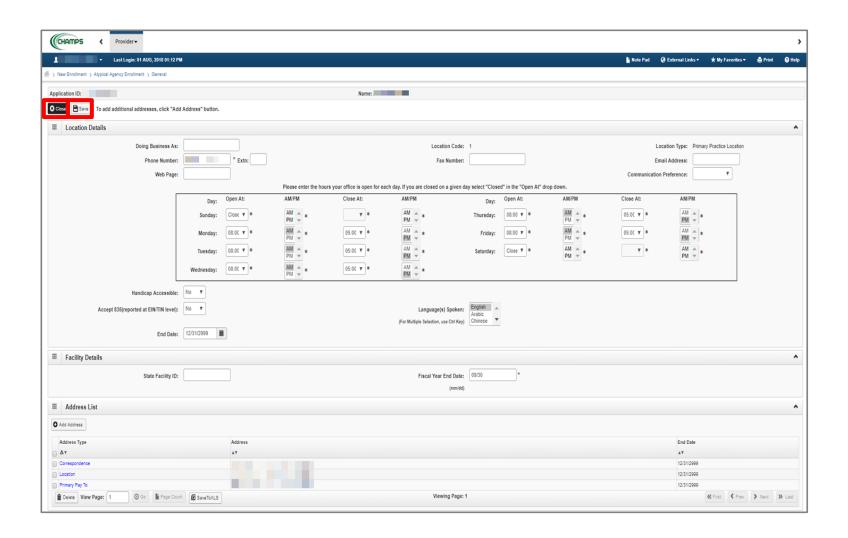


- In the Type of Address dropdown menu, select Correspondence.
  - Note: Fill in the address where you would like to receive your Home Help Agency mail.
- If the address is the same as the one entered previously, select Copy This Location Address, next to, Location Address.
- Click Validate Address.
- Click OK.





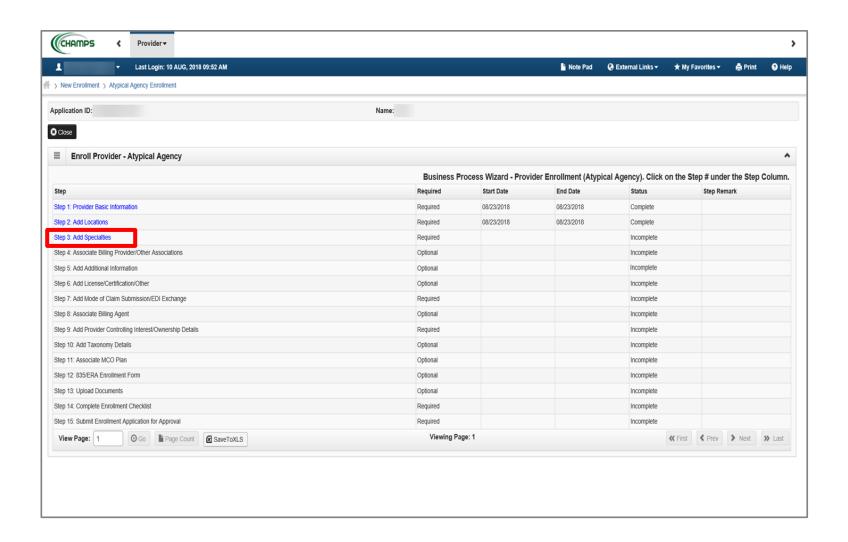
- Notice the Correspondence, Location, and Primary Pay To address types now have addresses.
- Click Save.
- Click Close on the next <u>two</u> screens to go back to the list of steps. (Not shown).





#### Home Help Agency New Enrollment Step 3: Add Specialties

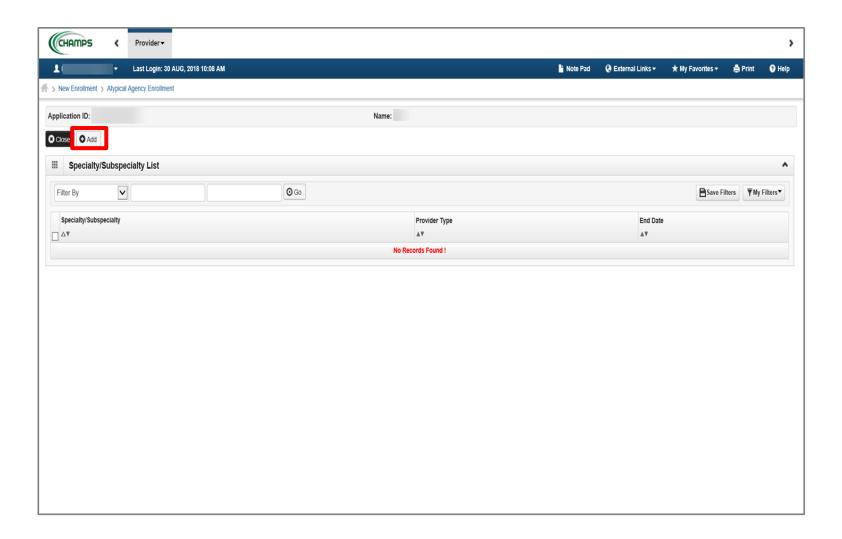
- Click Step 3: Add Specialties
- Note: Step 2 status has now changed from Incomplete to Complete.





#### Home Help Agency New Enrollment Step 3: Add Specialties

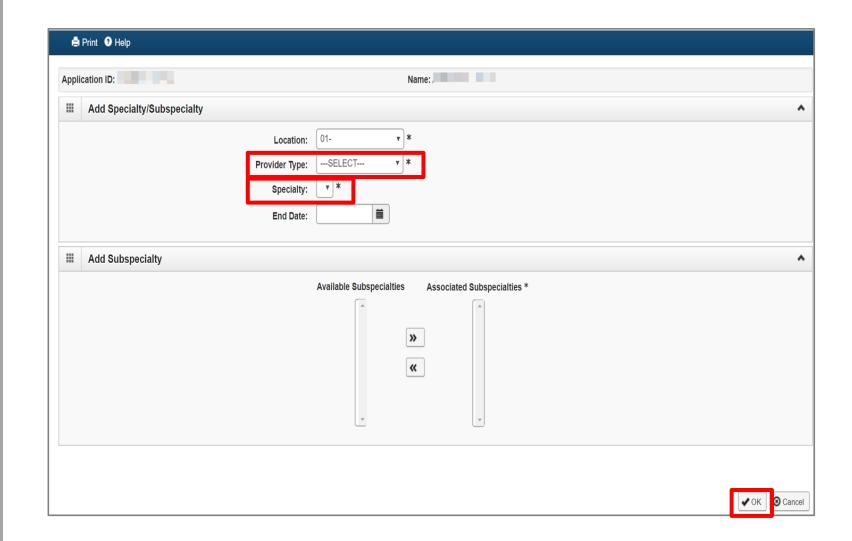
Click Add.





# Home Help Agency New Enrollment Step 3: Add Specialties

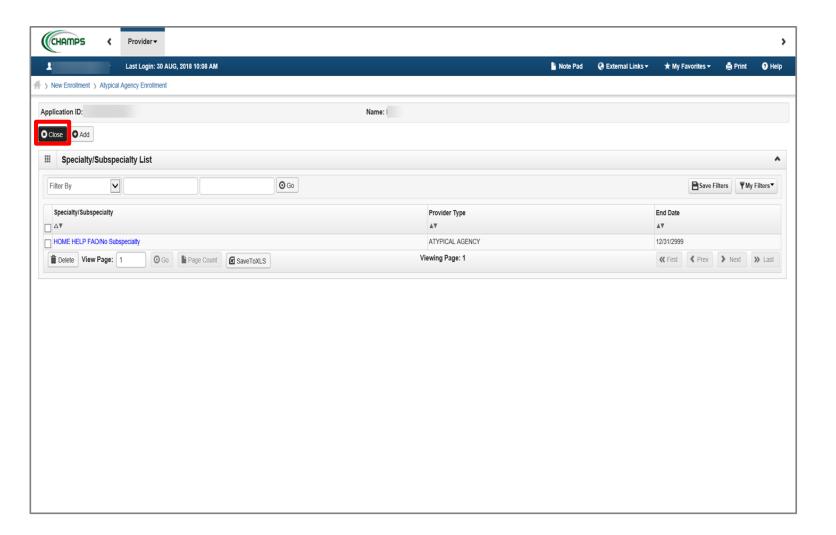
- In the Provider Type dropdown menu, select Atypical Agency.
- In the Specialty drop-down menu, select Home Help FAO.
- Click OK.





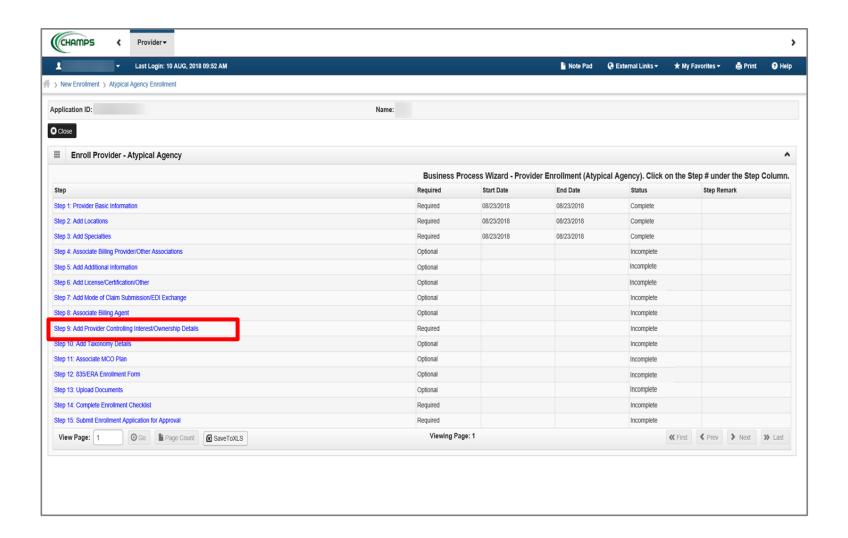
# Home Help Agency New Enrollment Step 3: Add Specialties

Click Close.



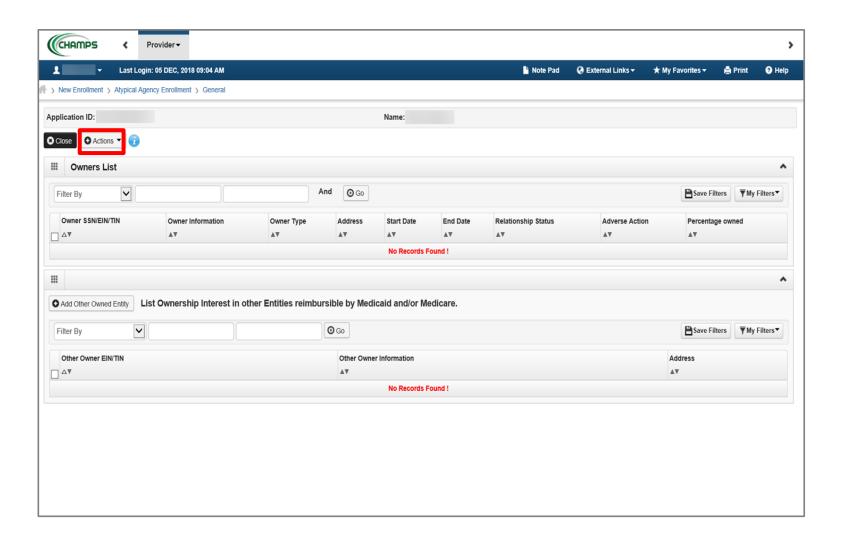


- Click Step 9: Add Provider
   Controlling
   Interest/Ownership Details.
- Note: Steps 4-8 are optional and are not required.



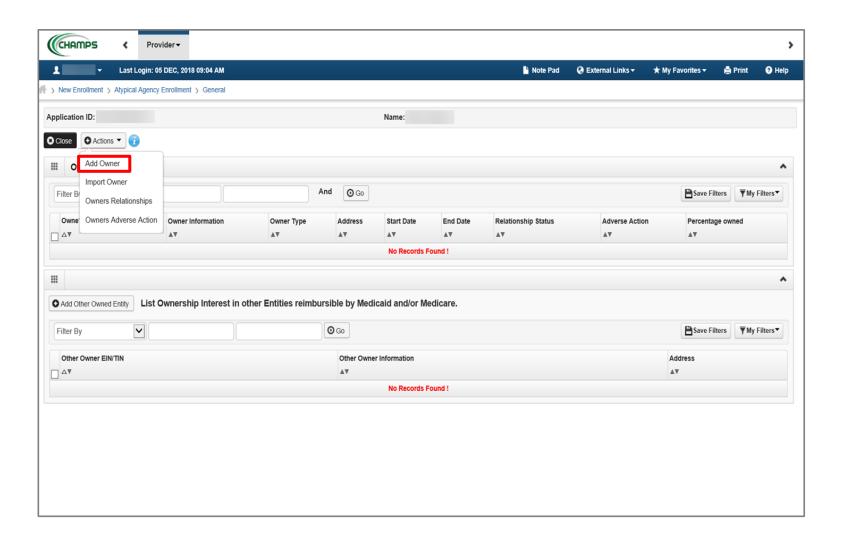


Click Actions.



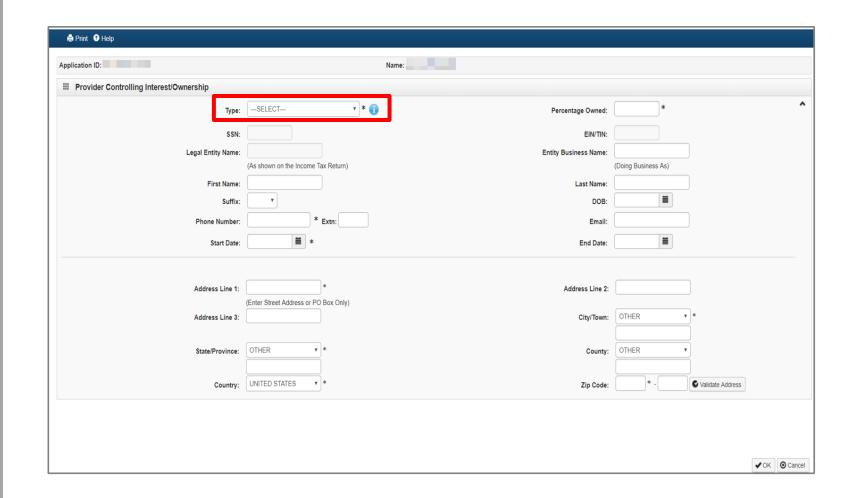


In the Actions drop-down menu, select Add Owner.





- In the Type drop-down menu:
  - If choosing; Agent, Government, Individual, Partnership or Sub-Contractor click here.
  - If choosing; Corporate-Charitable 501 (c) 3,
     Corporate-Non-Charitable,
     Holding Company, or
     Limited Liability Company
     click here.



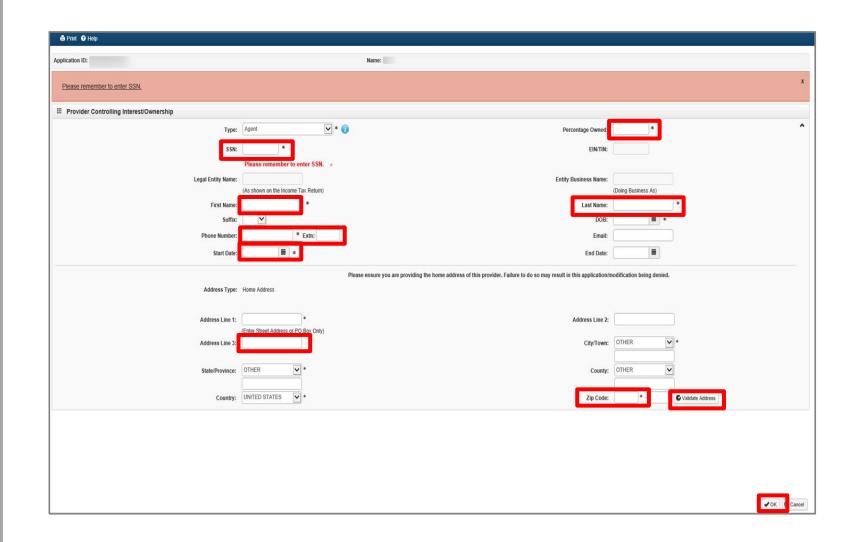


# Step 9: Adding Provider Controlling Interest/Ownership **Details**

These steps are only if you are choosing Agent, Government, Individual, Partnership or Sub-Contractor.

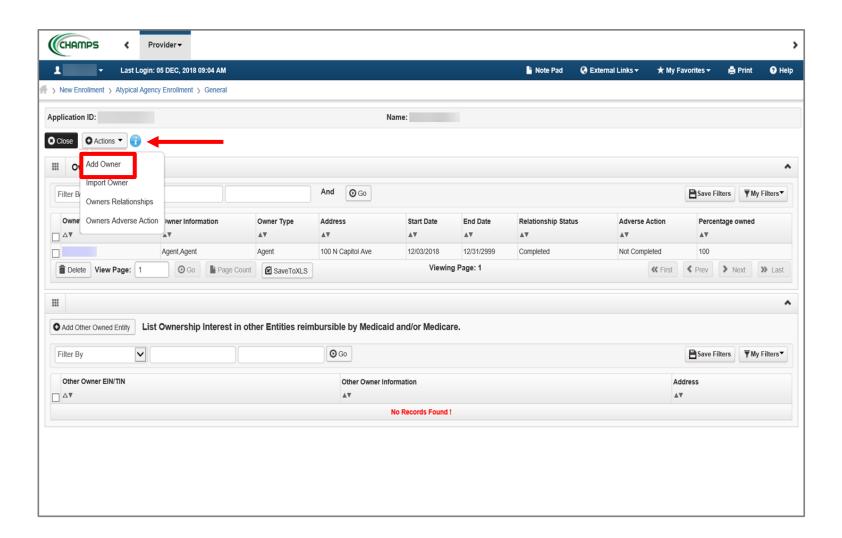


- Enter the required information, indicated by an asterisk (\*): SSN, Percentage Owned, Name, Phone Number, DOB, Start Date, Address, and Zip Code.
- Click Validate Address.
- Click OK.
  - Note: When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



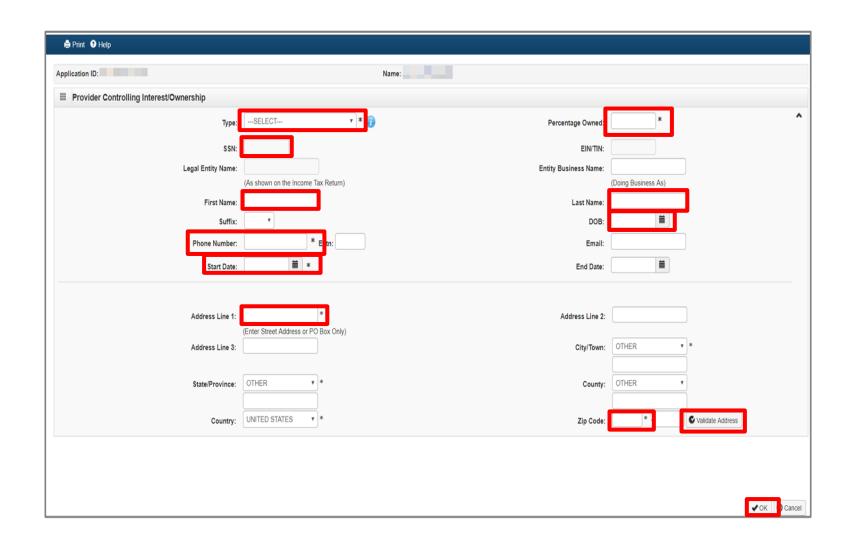


- Note: Agent (Agency Owner) will now be listed
- In the Actions drop-down menu, select Add Owner.



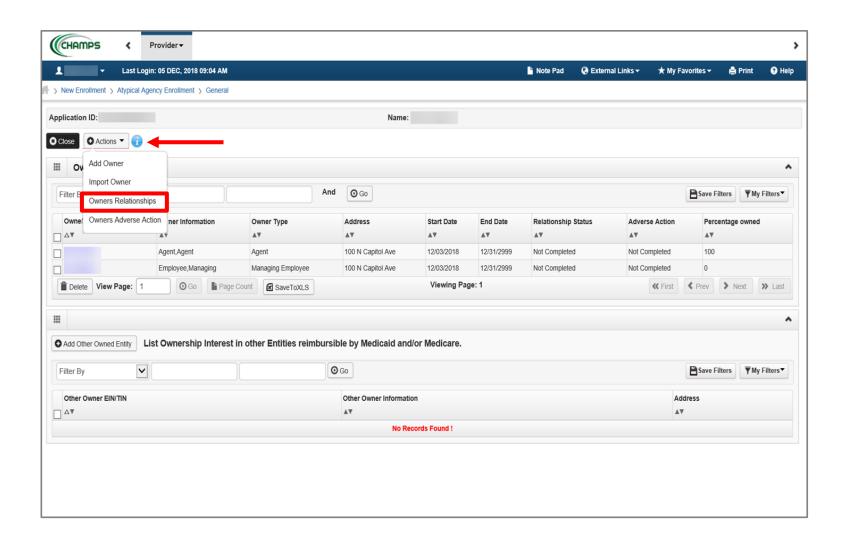


- In the Type drop-down menu, select Managing Employee. The Managing Employee can be the same as the Owner.
- Enter the required information, indicated by an asterisk (\*): SSN, Percentage Owned, First Name, Last Name, DOB, Phone Number, Start Date, Address, Zip Code.
- Click Validate Address.
- Click OK.
- Note: Type the number zero (o) in the Percentage Owned box.
  - Start Date is always the date you are filling out the application.
  - When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



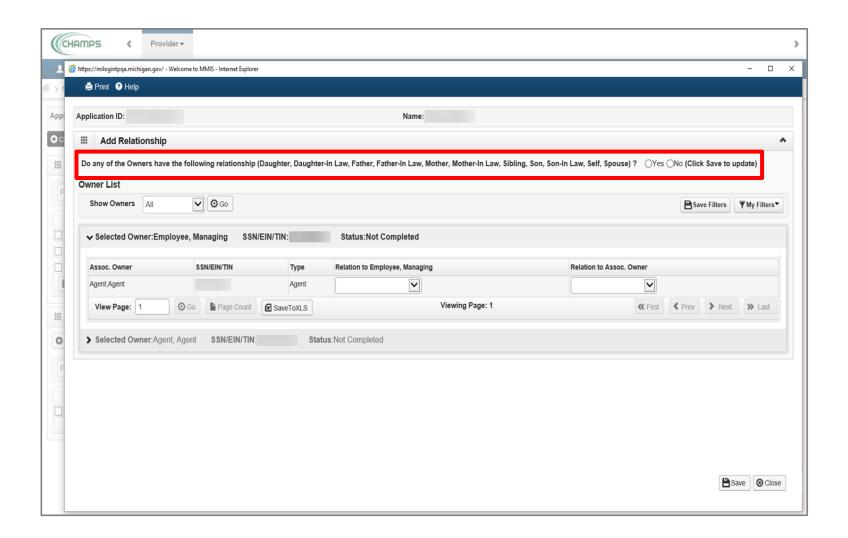


- Note: Managing Employee is now listed.
- In the Actions drop-down menu, select Owners Relationships.



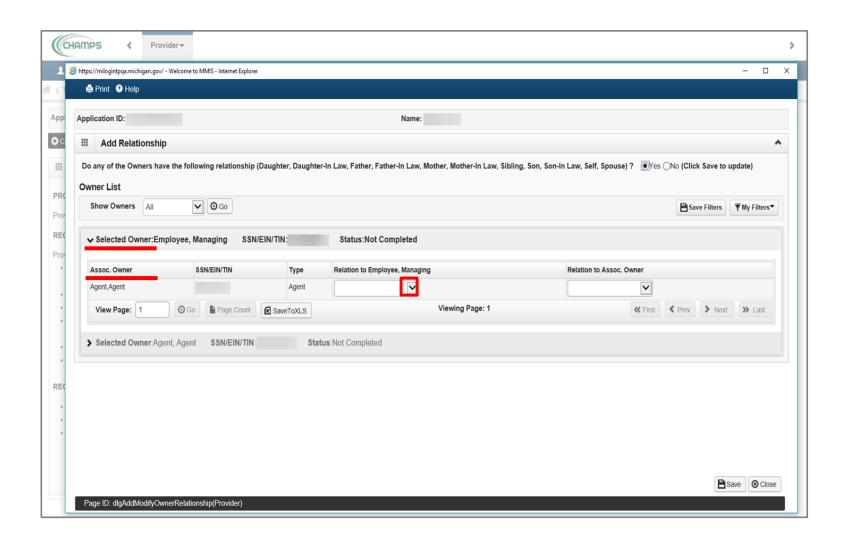


- Answer the question (at the top)
- If <u>no</u> relationships exist select No, click Save, read the popup message, select Ok, and Close. Click here.
- If relationships exist, select Yes, and continue with the presentation.



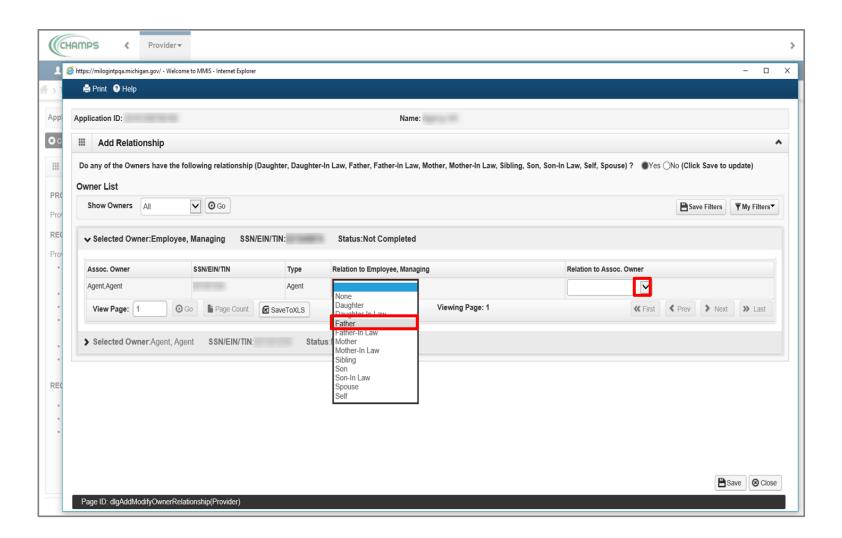


- If Yes, select the relationship between the Associated Owner to the Selected Owner (e.g., the relationship from the Agent to Employee, Managing) [Associated Owner -> Selected Owner]
- Click on the Relation to Employee, Managing dropdown



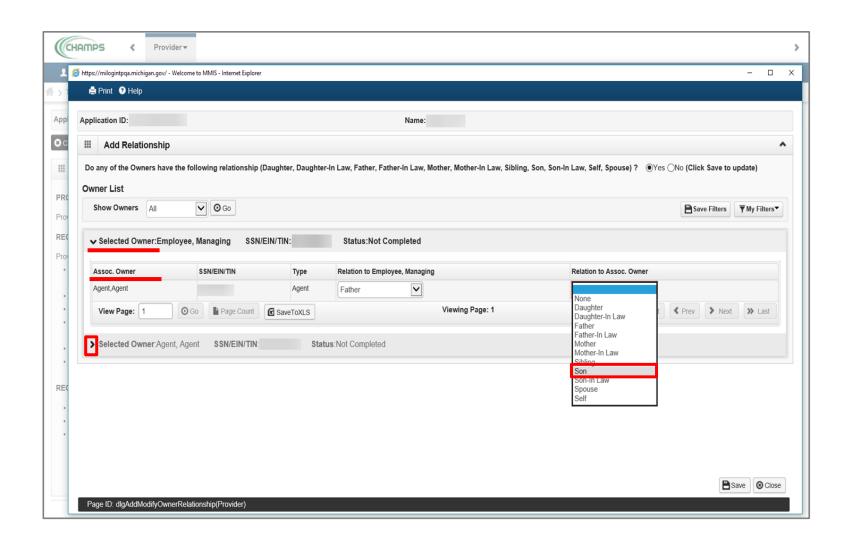


- Select Father
- In this example, the Agent is the father of the Selected Owner (Employee, Managing)
- Click on the Relation to Assoc. Owner drop-down



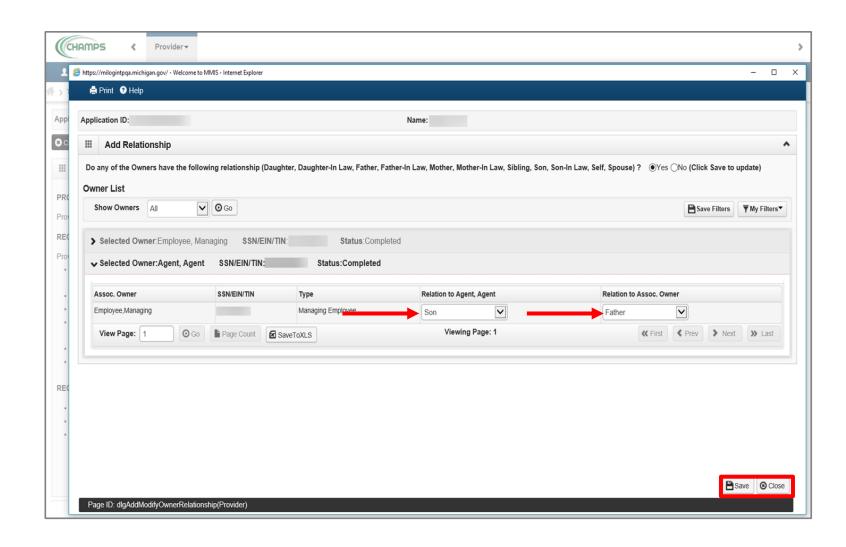


- Select the relationship between the Selected Owner (example: Managing Employee) to the Associated Owner (Agent, Agent or Agency Owner) [Selected Owner -> Associated Owner]
- Select Son; In this example, the Selected Owner (Employee, Managing) is the son of the Agent.
- Click on > to select the relationship(s) for the next
   Selected Owner



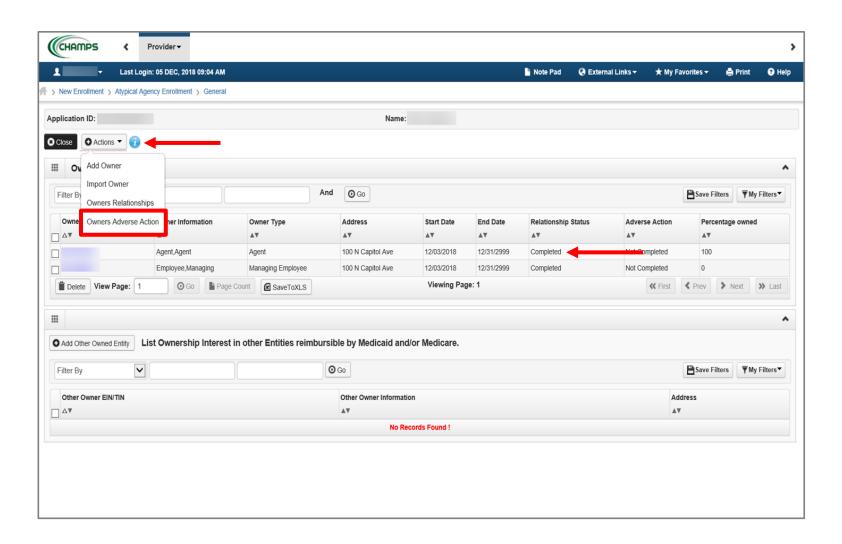


- For the next Selected Owner (Agent, Agent) the fields have prepopulated based on the relationship selection made under the previous Selected Owner (Employee, Managing).
- Once the relationship step for each Owner Type is completed, click Save.
- Click Close.



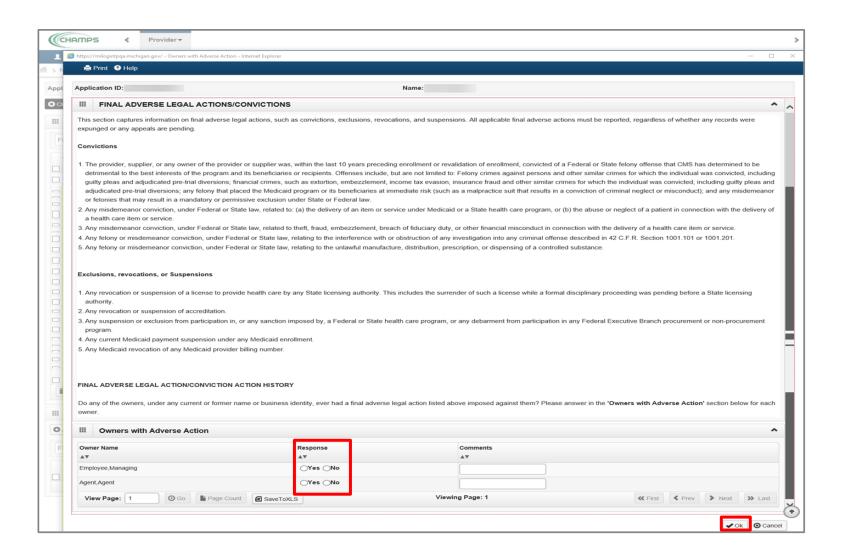


- Note: The Relationship Status shows completed for each Owner.
- In the Actions drop-down menu, select Owners Adverse Action.



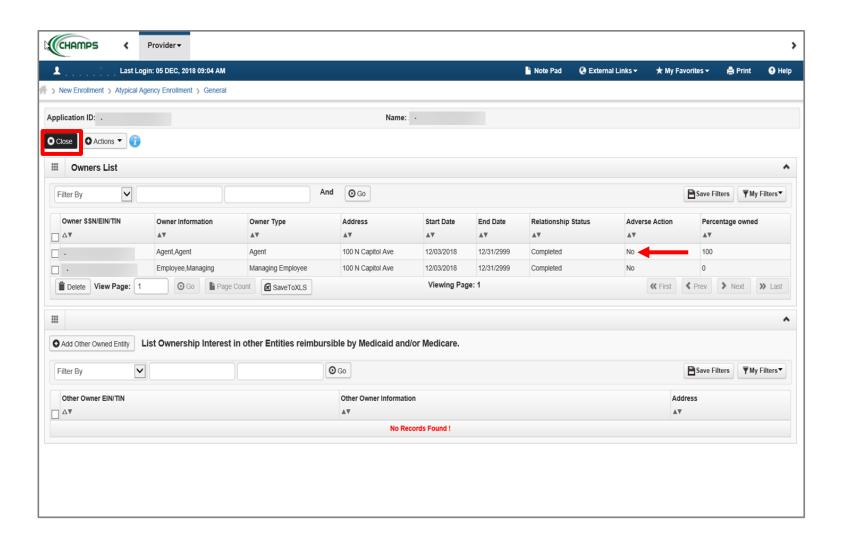


- Read the Final Adverse Legal Actions/Convictions statement.
- Answer the questions at the bottom by choosing yes or no and comment if necessary.
- Click OK.





- The Adverse Action column will show Yes or No indicating it's complete.
- Click Close.
- Click here for the next step in the Home Help Agency Enrollment.



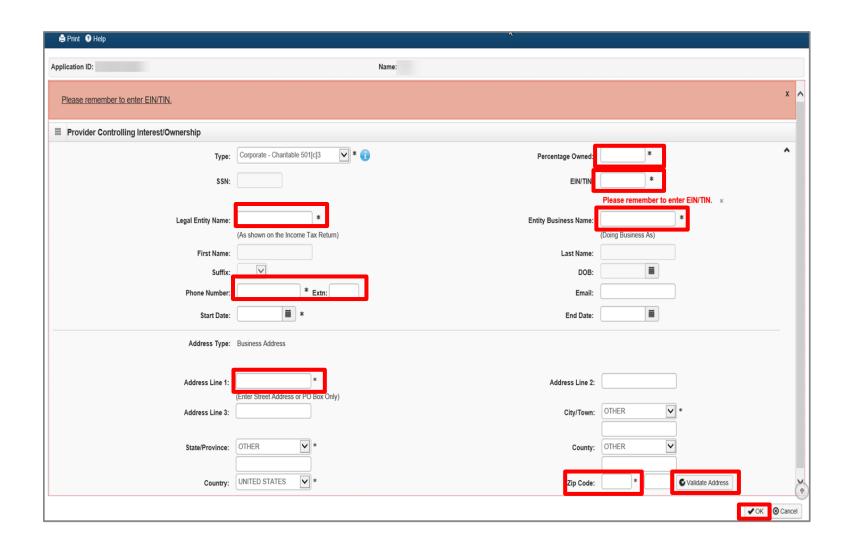


# Step 9: Adding Provider Controlling Interest/Ownership **Details**

These steps are only if you are choosing Corporate-Charitable 501(c)3, Corporate-Non Charitable, Holding Company, or Limited Liability Company.

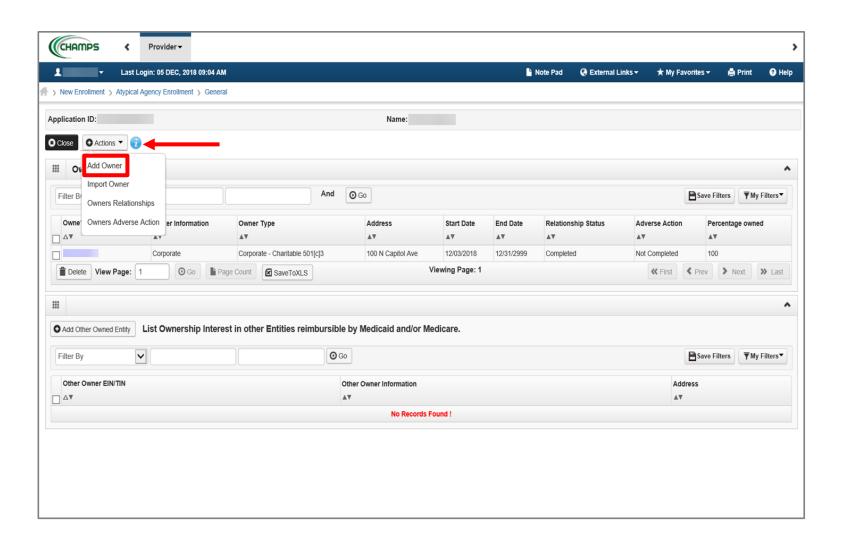


- Enter the required information, indicated by an asterisk (\*): Percentage Owned, EIN/TIN, Legal Entity Name, Entity Business Name, Phone Number, Start Date, Address, and Zip Code.
- Click Validate Address.
- Click OK.
- Note: When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



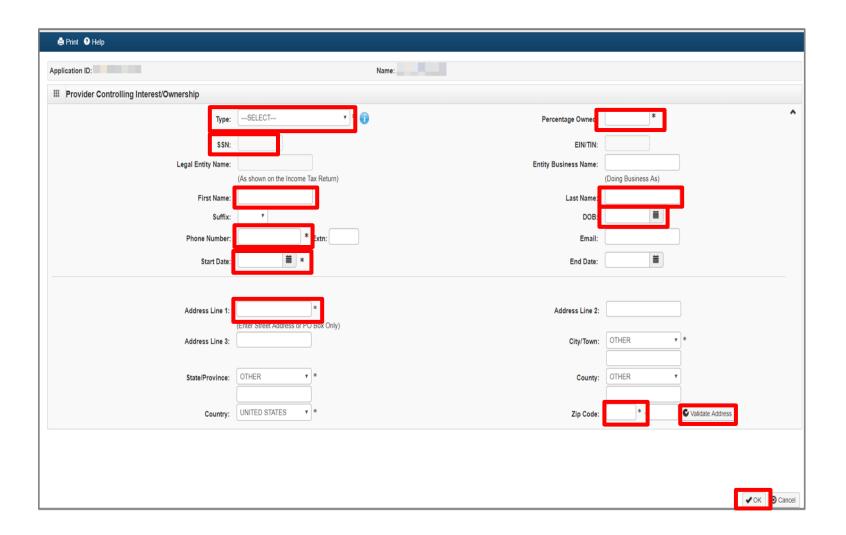


- Note: The Corporate-Charitable will now be listed
- In the Actions drop-down menu, select Add Owner.



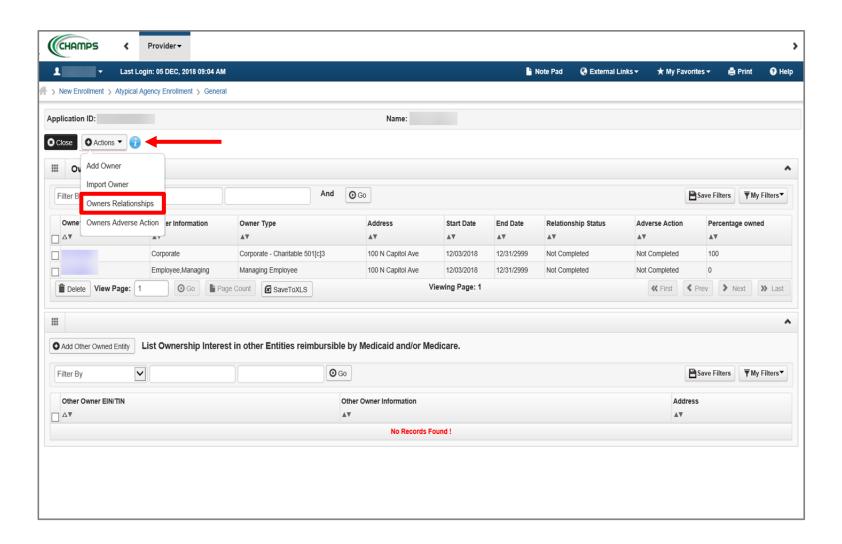


- In the Type drop-down menu, select Managing Employee. The Managing Employee can be the same as the Owner.
- Enter the required information: SSN, Percentage Owned, First Name, Last Name, DOB, Phone Number, Start Date, Address, Zip Code.
- Click Validate Address.
- Click OK.
  - Note: Type the number zero (o) in the Percentage Owned box.
  - Start Date is always the date you are filling out the application.
  - When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



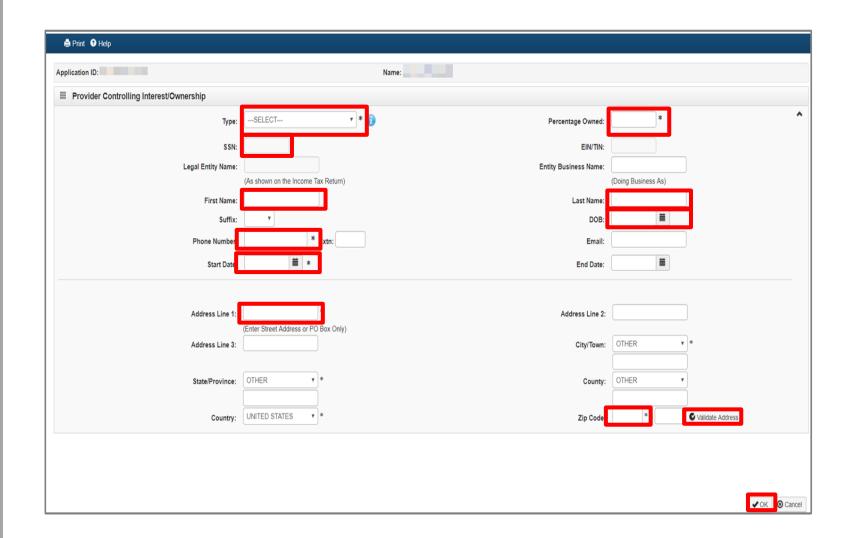


- Note: Managing Employee is now listed.
- In the Actions drop-down menu, select Owners Relationships.



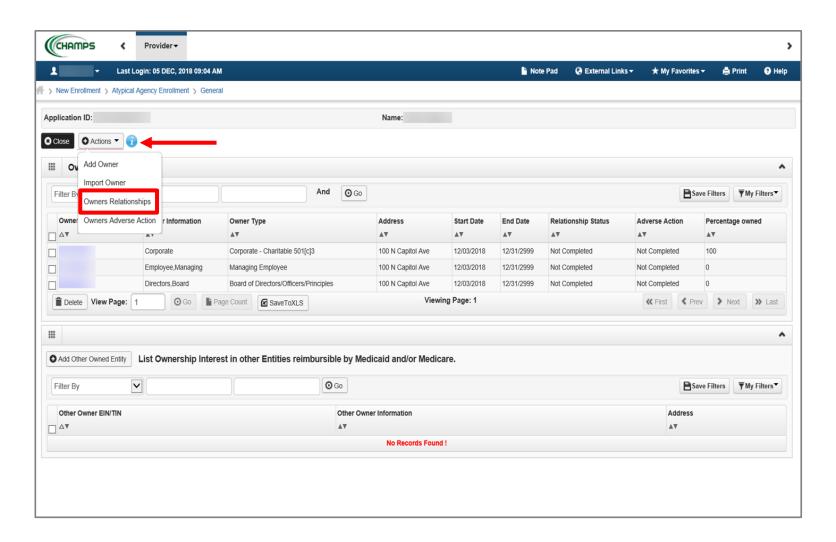


- In the Type drop-down menu, select Board of Directors/Officers/Principles.
- Enter the required information: SSN, Percentage Owned, First Name, Last Name, DOB, Phone Number, Start Date, Address, Zip Code.
- Click Validate Address.
- Click OK.
  - Note: Start Date is always the date you are filling out the application.
  - When the Zip Code is added, and Validate Address is selected, the State, City/Town, and County will automatically fill in.



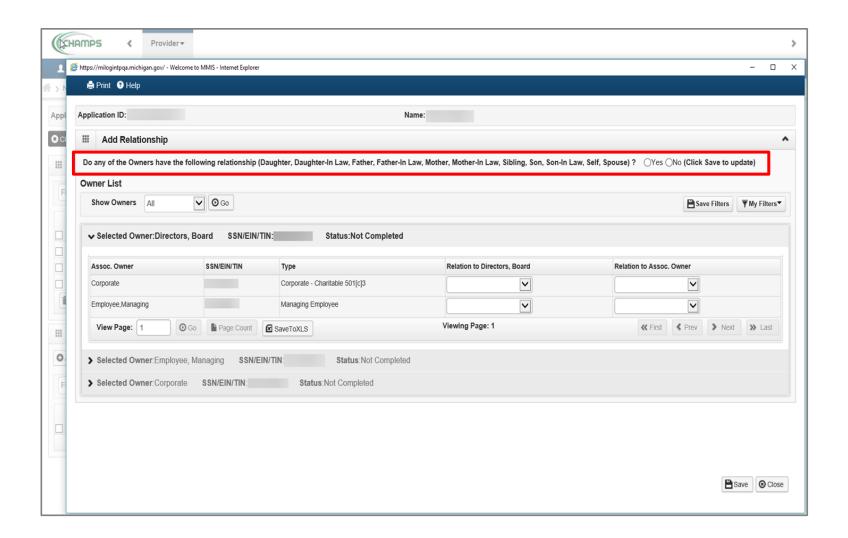


After entering all required
 Owner Types; in the Actions
 drop-down menu, select
 Owners Relationships.



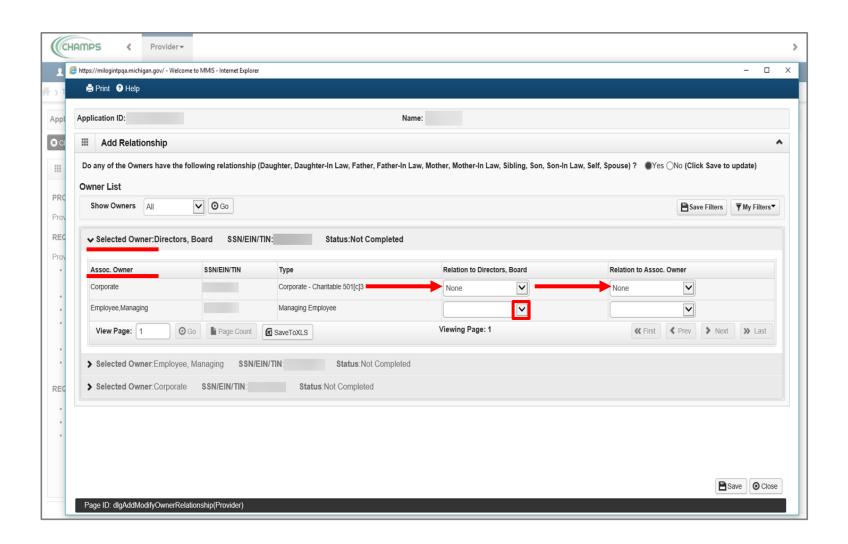


- Answer the question (at the top)
- If no relationships exist select No, click Save, read the popup message, select Ok, and Close. Click here.
- If relationships exist, select
   Yes and continue with the presentation.



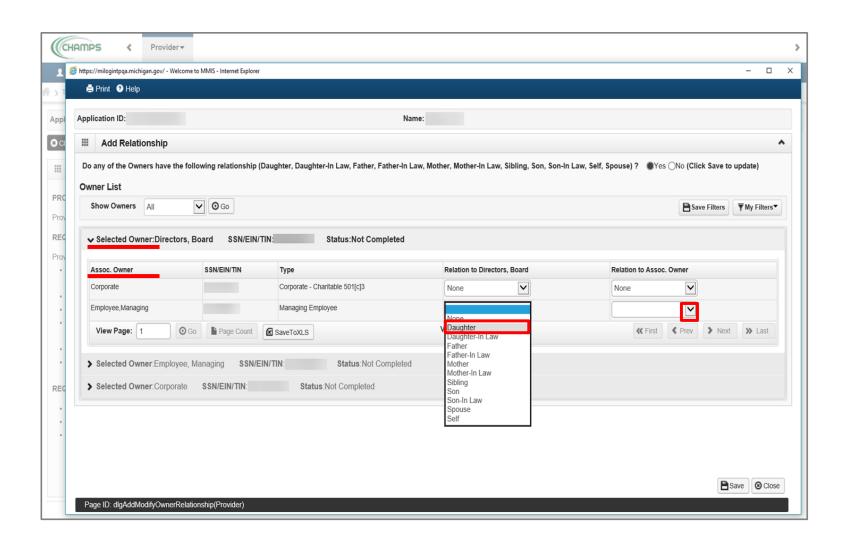


- If Yes, select the relationship between the Associated Owner to the Selected Owner (e.g., the relationship to the Directors from the Associated Owner, Corporate or Employee, Managing) [Associated Owner -> Selected Owner]
- In this example there is no relationship between the Corporation and the Directors
- Click on the Relation to Directors, Board drop-down



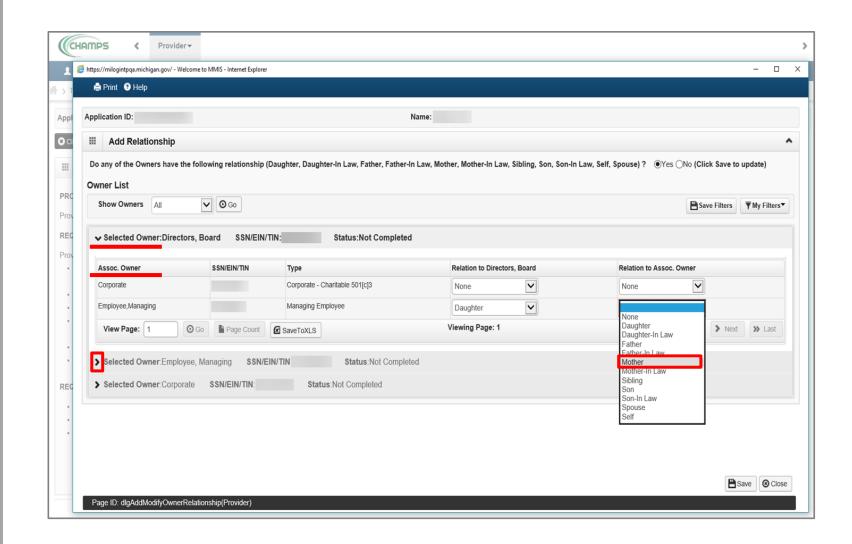


- Select the Associated
   Owner's (Employee,
   Managing) relationship to
   the Selected Owner
   (Directors, Board)
- In this example the Managing Employee is the daughter of the Directors
- Click on the Relation to Assoc. Owner drop-down



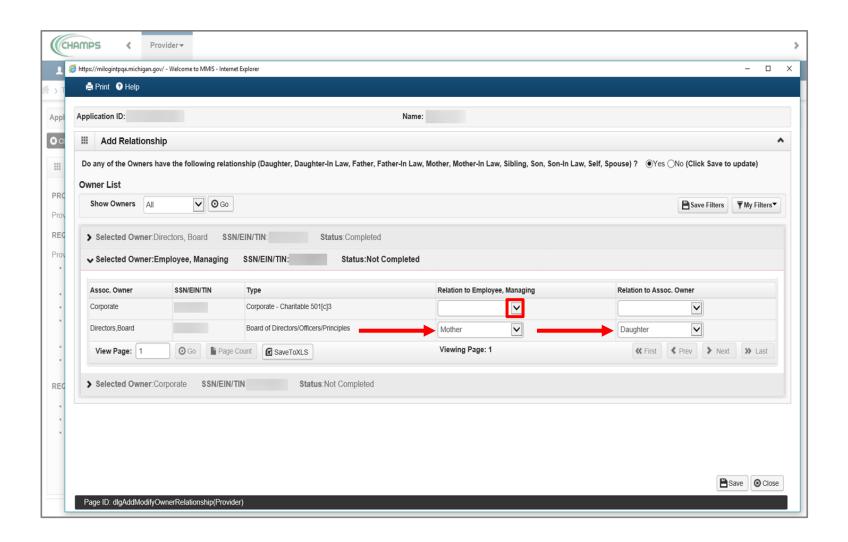


- Select the relationship from the Selected Owner (Directors, Board) back to the Associated Owner (Employee, Managing).
- In this example the Director is the mother of the Managing Employee
- Click on > to select the relationship(s) for the next Selected Owner



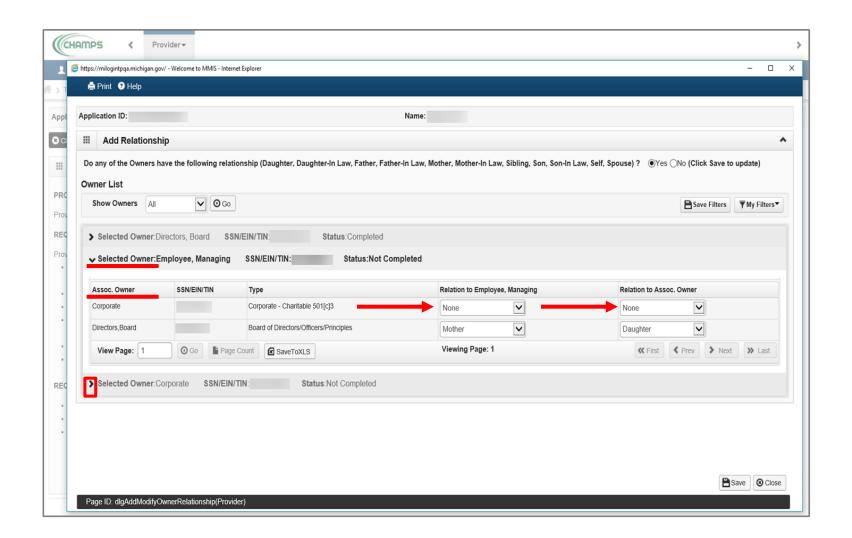


- For the next Selected Owner (Employee, Managing) some of the fields have prepopulated based on the relationship selection made under the previous Selected Owner (Director, Board)
- Click on the Relation to Employee, Managing dropdown



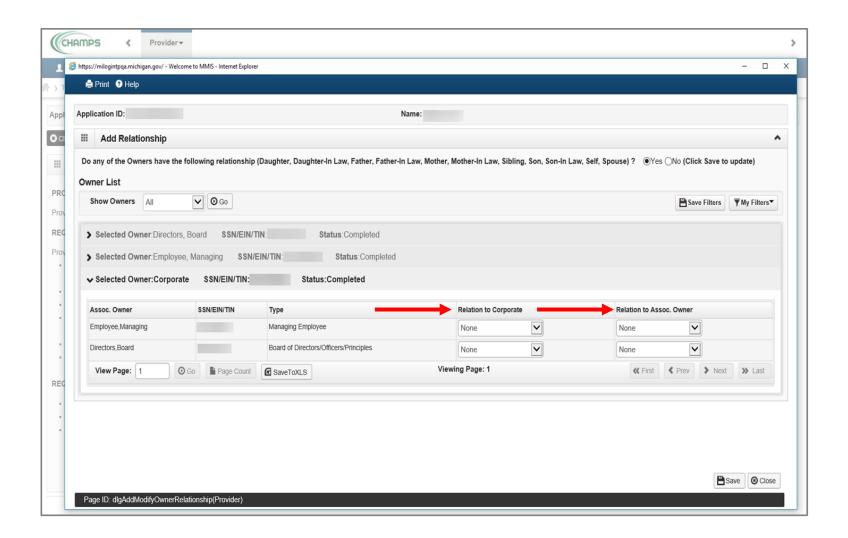


- Select the Associated Owner's (Corporate) relationship to the Selected Owner (Employee, Managing)
- Select the Selected Owner's (Employee, Managing) relationship back to the Associated Owner (Corporate)
  - In both examples, none is selected as there is no relationship between the Selected Owner and Associated Owner.
- Click on > to select the relationship(s) for the next
   Selected Owner



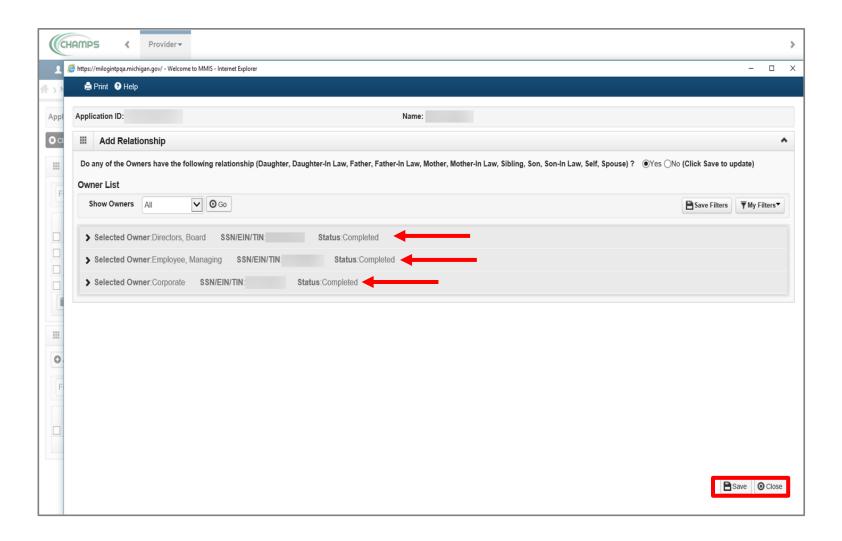


 For the next Selected Owner (Corporate) the fields have prepopulated based on the previous relationships chosen



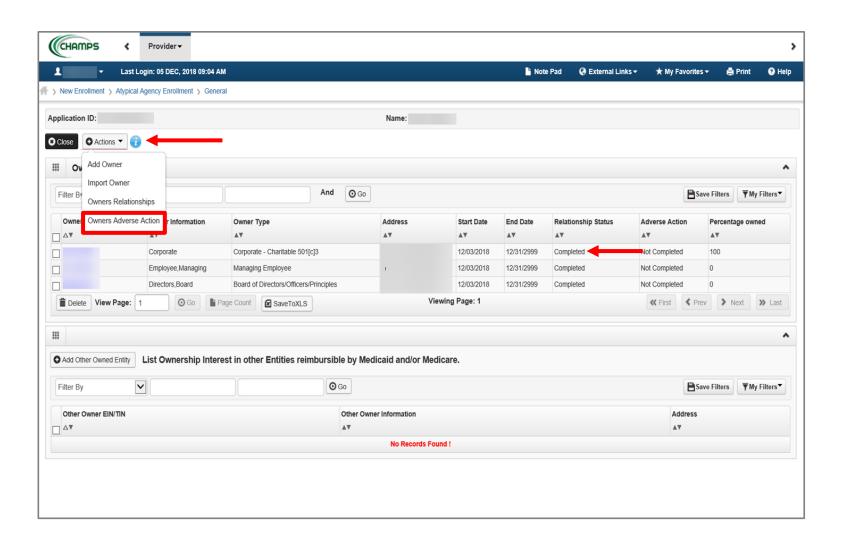


- Once the relationship step for each Owner Type is completed, click Save.
- Click Close.



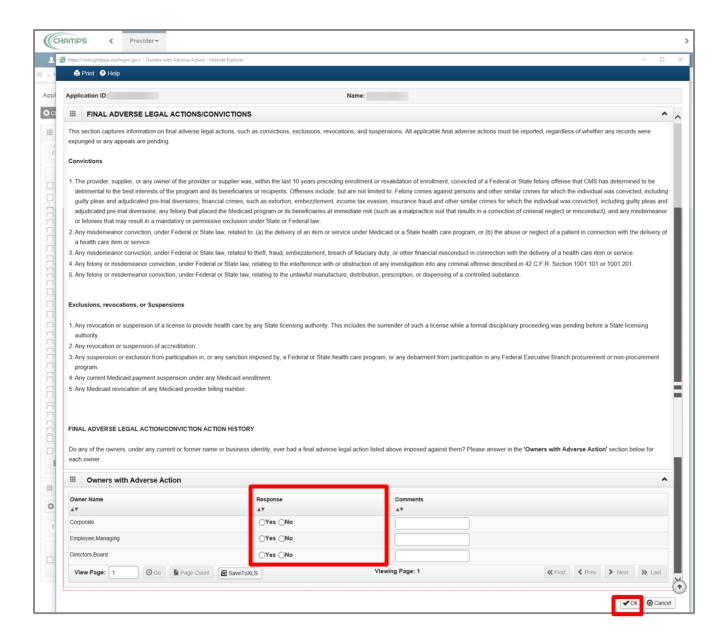


- Note: The Relationship Status shows completed for each Owner.
- In the Actions drop-down menu, select Owners Adverse Action.





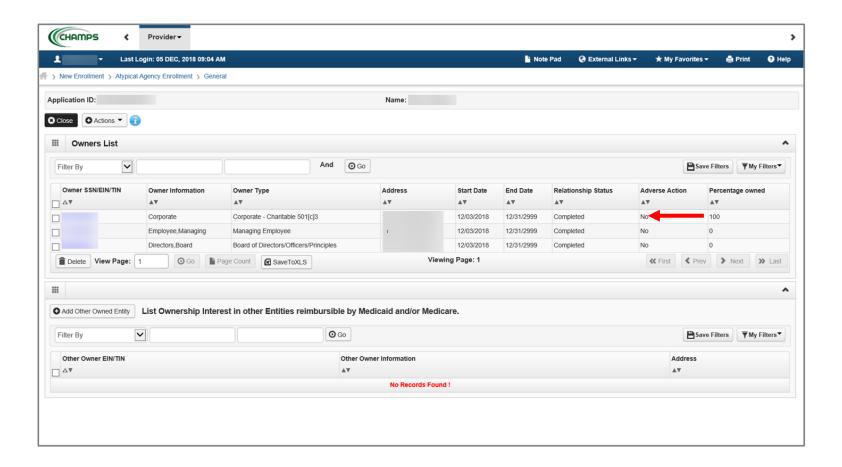
- Read the Final Adverse Legal Actions/Convictions statement.
- Answer the questions at the bottom by choosing Yes or No and comment if necessary.
- Click OK.





### Home Help Agency New Enrollment Step 9: Add Provider Controlling Interest

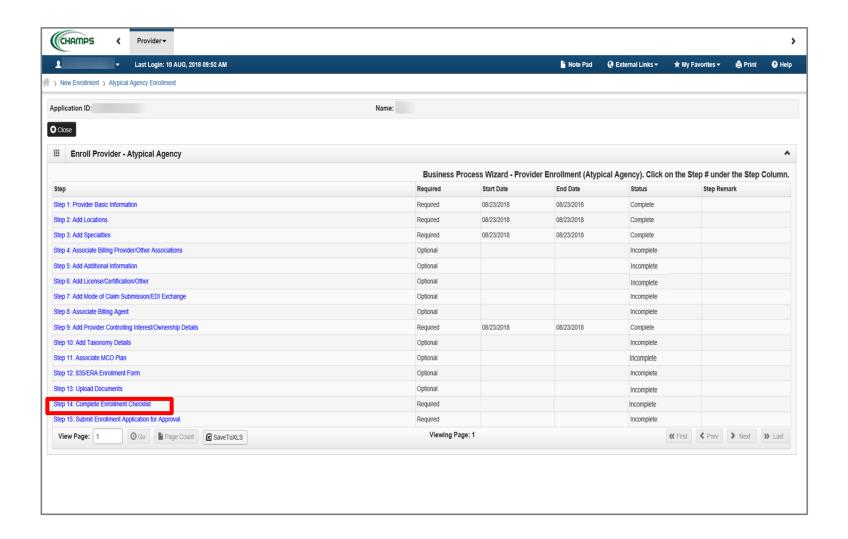
- The Adverse Action column will show Yes or No indicating it's complete.
- Click Close to return to the remaining enrollment steps to be completed





### Home Help Agency New Enrollment Step 14: Complete Enrolment Checklist

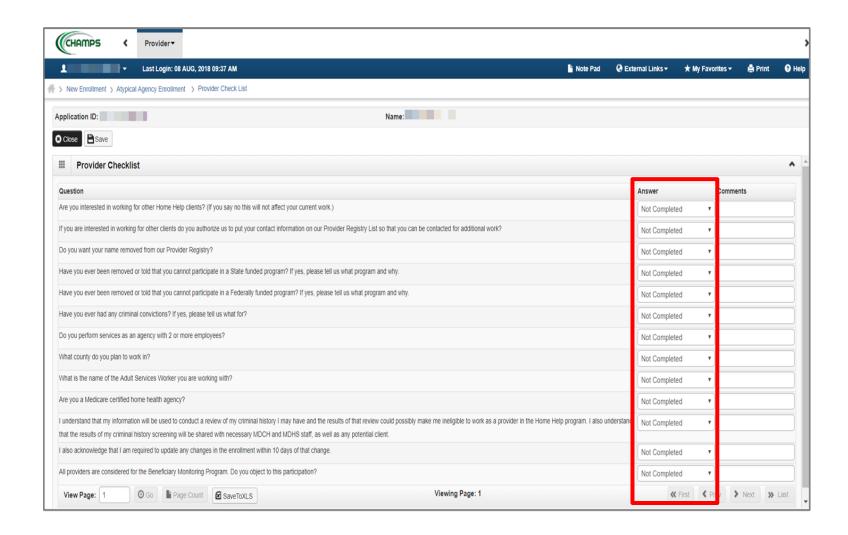
Click Step 14: Complete
 Enrollment Checklist.





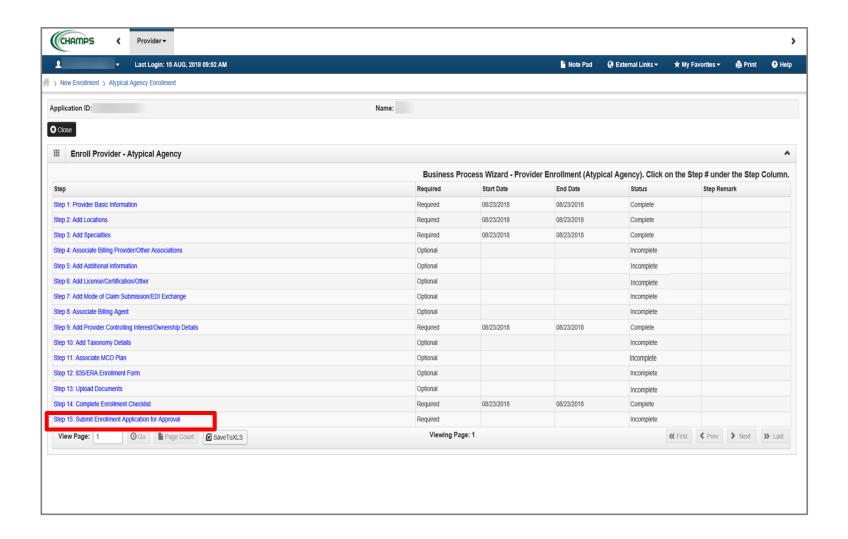
#### Home Help Agency New Enrollment Step 14: Complete Enrolment Checklist

- Answer all of the Provider
  Checklist questions by
  choosing Yes or No from each
  drop-down menu in the
  Answer column. If an answer
  is required, choose Yes and
  put the answer in Comments.
- Click Save.
- Click Close.
  - Note: The County Name, Worker Name and Clients Name will need to be included in the comments box on the appropriate question



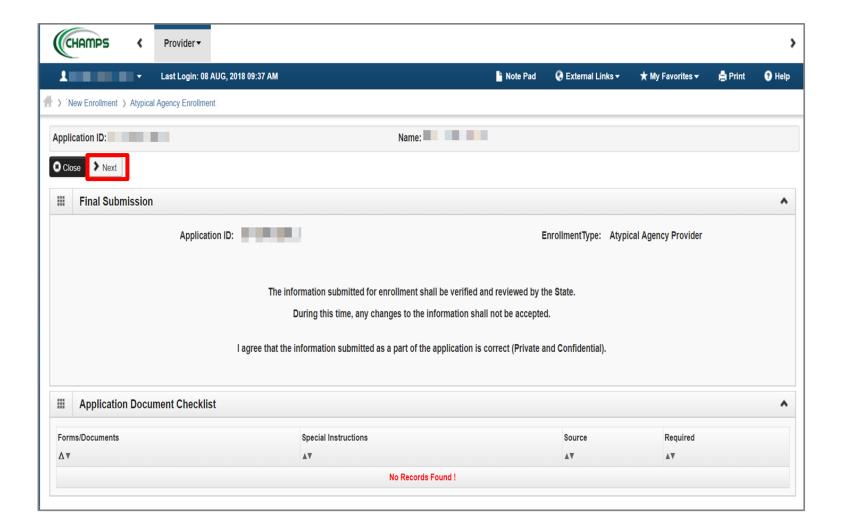


 Click Step 15: Submit Enrollment Application for Approval.



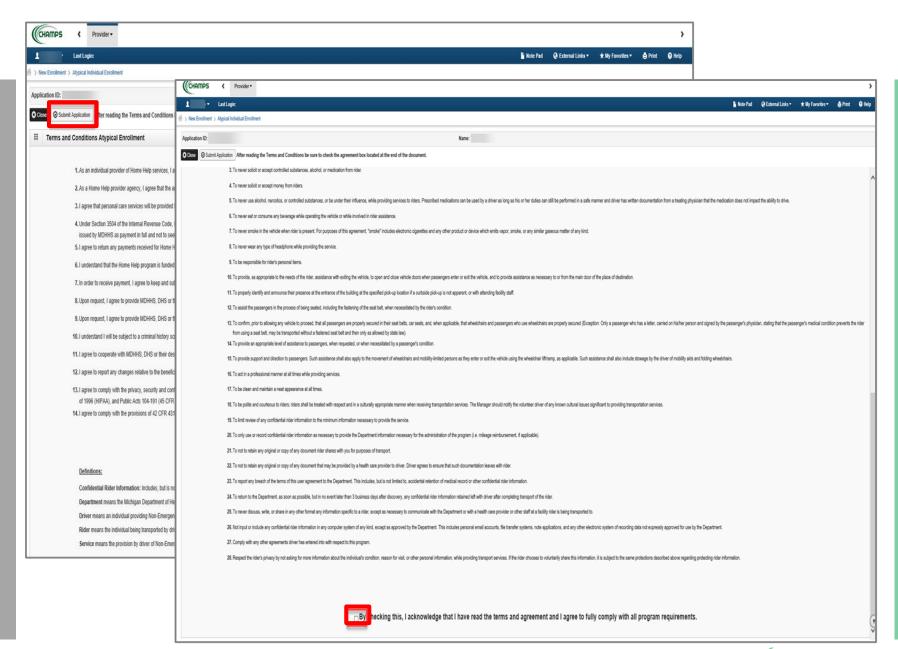


 Click Next. By clicking the Next button, you "agree that the information submitted as part of the application is correct (Private and Confidential)."



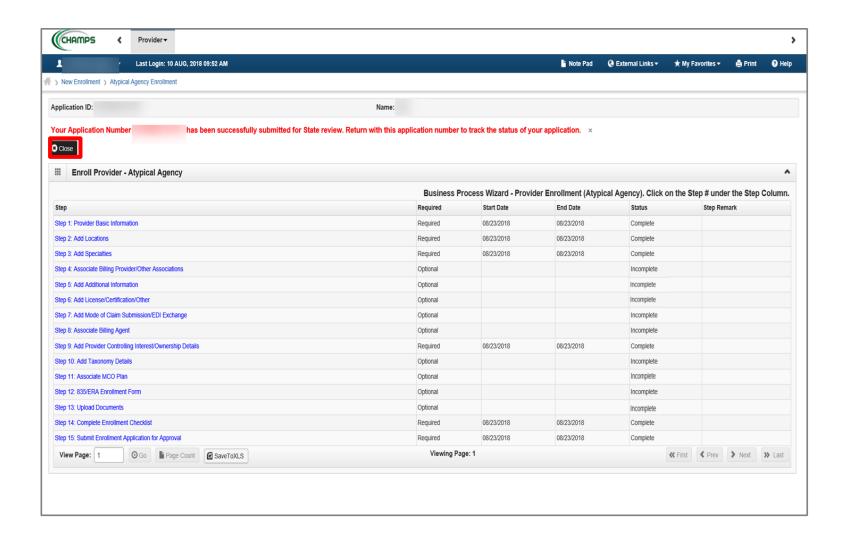


- Read the Terms and Conditions Atypical Enrollment statement.
- Check the box at the bottom indicating you have read and agree to the terms.
- Click Submit Application.





- If you have not taken note of your Application Number, please do so for tracking purposes.
- Click Close and close out of the application.

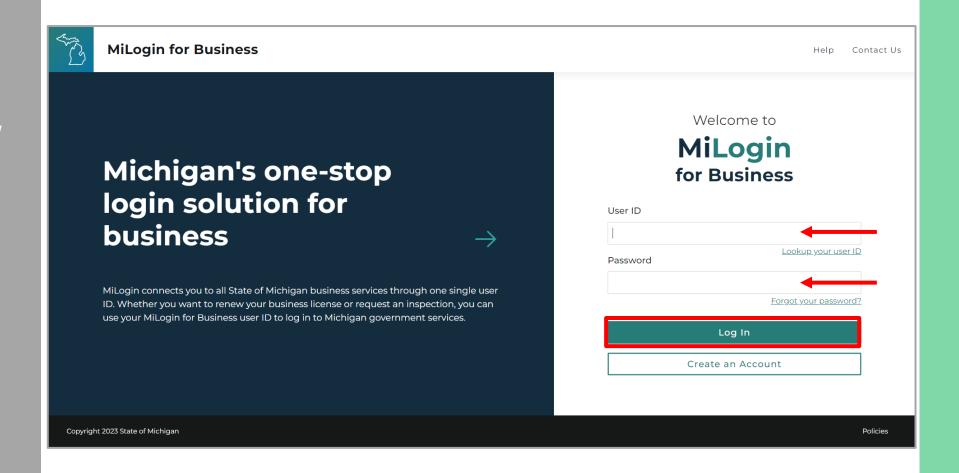




How to Track the Status of your CHAMPS Provider Enrollment Application

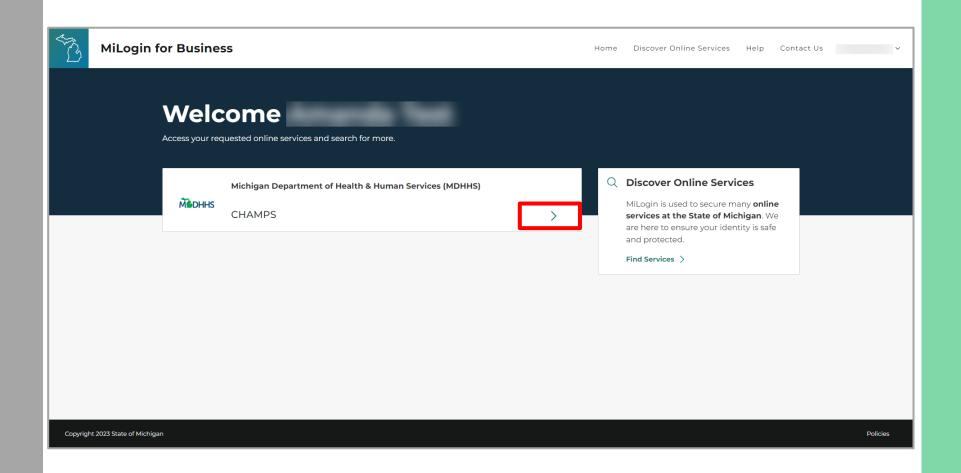


- Open your web browser (e.g., Internet Explorer, Google Chrome, Mozilla Firefox, etc.).
- Enter
   <u>https://milogintp.Michigan.g</u>
   <u>ov</u> into the search bar.
- Enter the User ID and Password and click Login
  - If you don't remember your User ID or Password, you can select "Lookup your User ID" or "Forgot your password?"



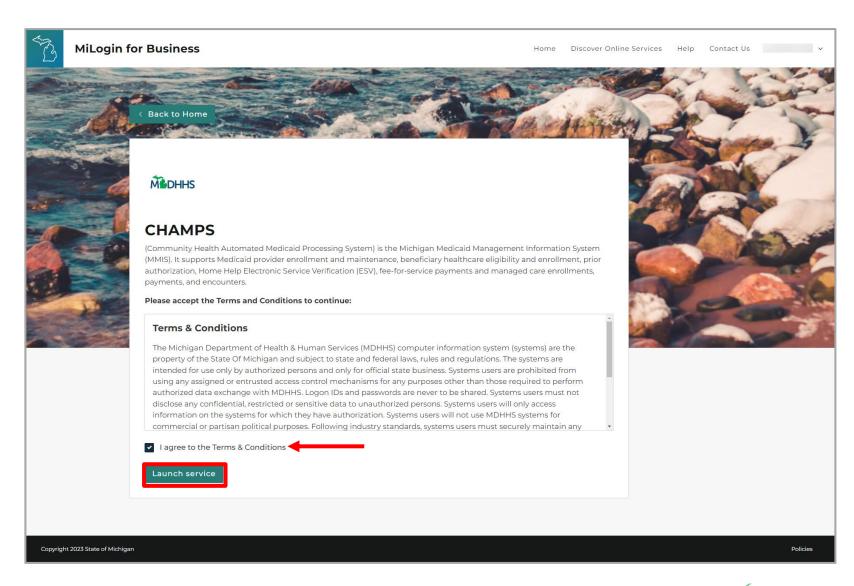


- You will be directed to your MiLogin Welcome Page.
- Click the CHAMPS hyperlink.



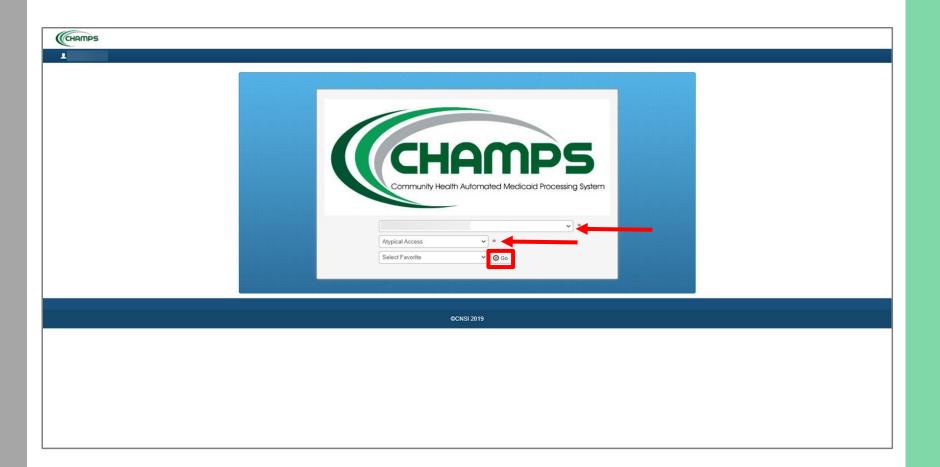


- Review the terms and conditions and check the 'l agree to the Terms & Conditions'.
- Click Launch service.



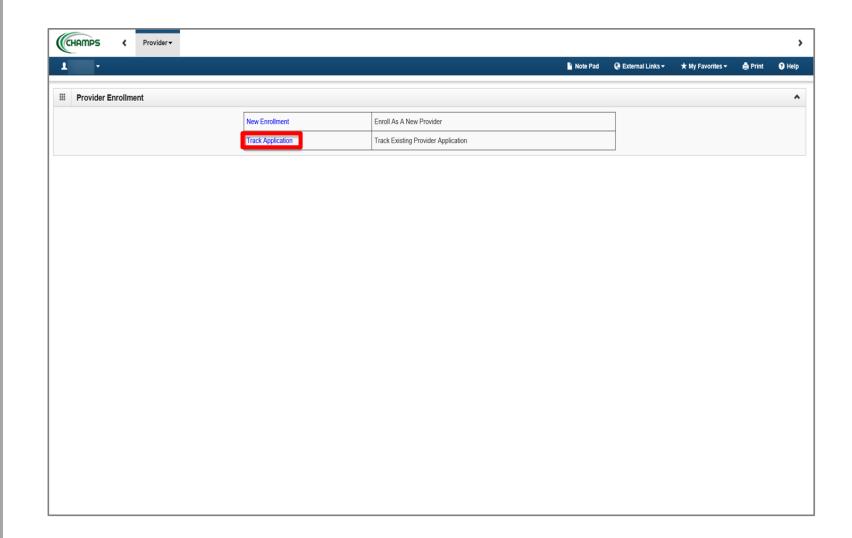


- The Provider ID and Name will show in the top dropdown menu
- In the Select Profile dropdown menu, select Atypical Access
- Click Go



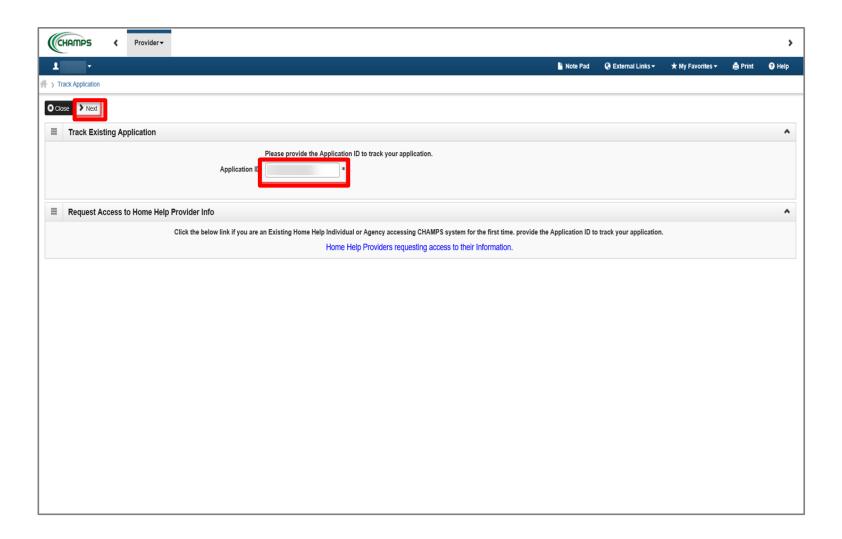


- If you would like to check the status of your application, you can do so from the CHAMPS homepage:
- On the homepage, click the Track Application hyperlink.



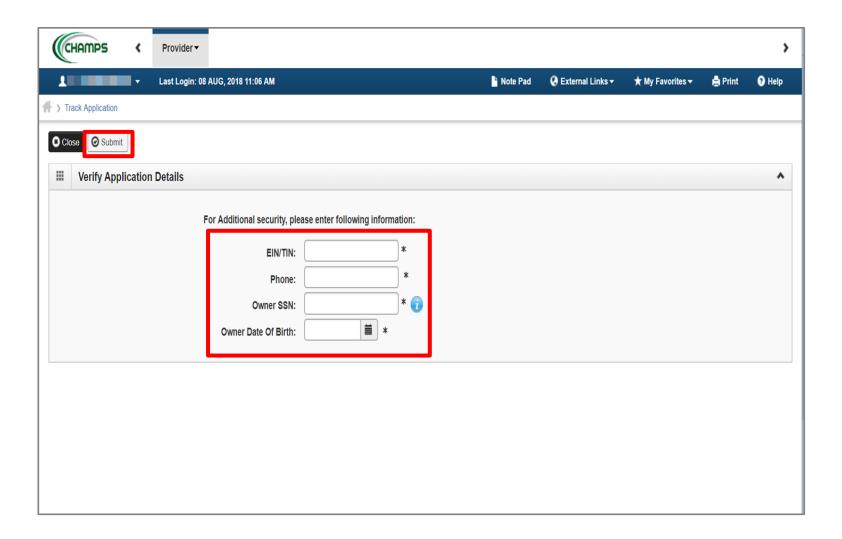


- Enter your Application ID.
- Click Next.



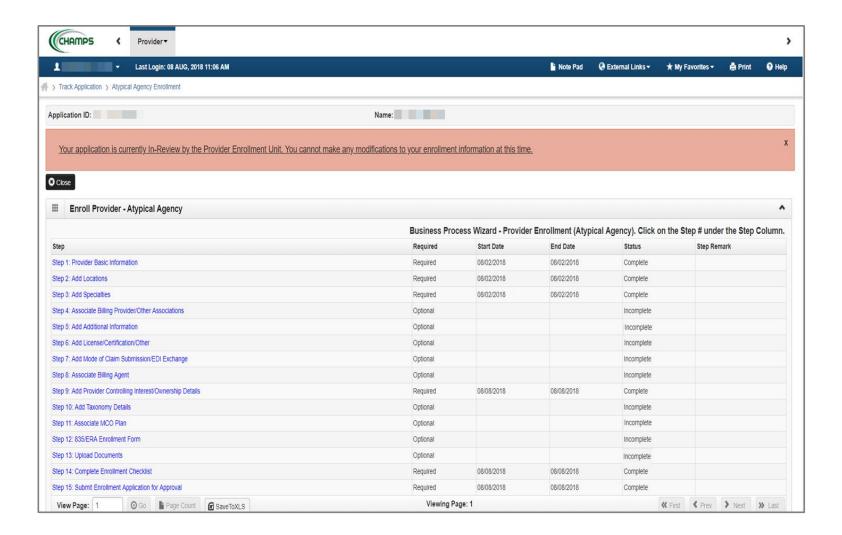


- Enter your EIN/TIN, Phone Number, Date of Birth, Social Security Number and Date of Birth.
- Click Submit.





A text box at the top will confirm the status of your application. If you do not see this statement, you have not completed and submitted the application to the state for review. Please complete all required steps prior to submitting.





# Application Approval

- Once the application is completed in CHAMPS, Agencies will have additional documentation to submit prior to receiving an approval letter.
- Providers will receive an email detailing the documentation needed. The email will go to the email address provided in your application.
- Once approved, Agencies will receive a confirmation letter. The confirmation letter will go to the Correspondence Address provided in your application.

For additional resources, visit the MDHHS Home Help website at <a href="https://www.Michigan.gov/homehelp">www.Michigan.gov/homehelp</a>



# Provider Resources



Home Help website: www.Michigan.gov/HomeHelp



We continue to update our Provider Resources:

<u>CHAMPS Resources</u>
<u>Listserv Instructions</u>
<u>Agency Providers</u>
<u>Individual Providers</u>



Home Help Provider Support Hotline:

<u>ProviderSupport@Michigan.gov</u>

1-800-979-4662



Thank you for participating in the Michigan Medicaid Program

